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DESIGNATED/ELECTED OFFICE (DO/EO/US)  
CONCERNING A FILING UNDER 35 U.S.C. 371

SWA-XXX

U.S. APPLICATION NO. (If known, see 37 CFR 1.5)

09/806110

INTERNATIONAL APPLICATION NO.

PCT/CA99/00895

INTERNATIONAL FILING DATE

27 SEPT 1999

PRIORITY DATE CLAIMED

28 SEPT 1998

TITLE OF INVENTION

USE OF PEX IN THE TREATMENT OF METABOLIC BONE DISEASES

APPLICANT(S) FOR DO/EO/US

ANDREW C. KARAPLIS, ET. AL.

Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:

1. ☒ This is a **FIRST** submission of items concerning a filing under 35 U.S.C. 371.
2. ☐ This is a **SECOND** or **SUBSEQUENT** submission of items concerning a filing under 35 U.S.C. 371.
3. ☐ This is an express request to begin national examination procedures (35 U.S.C. 371(f)). The submission must include items (5), (6), (9) and (21) indicated below.
4. ☐ The US has been elected by the expiration of 19 months from the priority date (Article 31).
5. ☒ A copy of the International Application as filed (35 U.S.C. 371(c)(2))
  - a. ☐ is attached hereto (required only if not communicated by the International Bureau).
  - b. ☒ has been communicated by the International Bureau. (Convenience copy provided)
  - c. ☐ is not required, as the application was filed in the United States Receiving Office (RO/US).
6. ☐ An English language translation of the International Application as filed (35 U.S.C. 371(c)(2)).
  - a. ☐ is attached hereto.
  - b. ☐ has been previously submitted under 35 U.S.C. 154(d)(4).
7. ☐ Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3))
  - a. ☐ are attached hereto (required only if not communicated by the International Bureau).
  - b. ☐ have been communicated by the International Bureau.
  - c. ☐ have not been made; however, the time limit for making such amendments has NOT expired.
  - d. ☐ have not been made and will not be made.
8. ☐ An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).
9. ☐ An oath or declaration of the inventor(s) (35 U.S.C. 371(c)(4)).
10. ☐ An English language translation of the annexes of the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)).

## Items 11 to 20 below concern document(s) or information included:

11. ☐ An Information Disclosure Statement under 37 CFR 1.97 and 1.98.
12. ☒ An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.
13. ☐ A FIRST preliminary amendment.
14. ☐ A SECOND or SUBSEQUENT preliminary amendment.
15. ☐ A substitute specification.
16. ☐ A change of power of attorney and/or address letter.
17. ☒ A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 35 U.S.C. 1.821 - 1.825.
18. ☐ A second copy of the published international application under 35 U.S.C. 154(d)(4).
19. ☐ A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).
20. ☒ Other items or information: International Preliminary Examination Report accompanied by annexes. (Convenience copy provided)

U.S. APPLICATION NO. (if known, see 37 CFR 1.5)

09/806110

INTERNATIONAL APPLICATION NO  
PCT/CA99/00895ATTORNEY'S DOCKET NUMBER  
SWA-XXX21. ☒ The following fees are submitted:**BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):**Neither international preliminary examination fee (37 CFR 1.482)  
nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO  
and International Search Report not prepared by the EPO or JPO. .... \$1000.00International preliminary examination fee (37 CFR 1.482) not paid to  
USPTO but International Search Report prepared by the EPO or JPO ..... \$860.00International preliminary examination fee (37 CFR 1.482) not paid to USPTO  
but international search fee (37 CFR 1.445(a)(2)) paid to USPTO ..... \$710.00International preliminary examination fee (37 CFR 1.482) paid to USPTO  
but all claims did not satisfy provisions of PCT Article 33(1)-(4) ..... \$690.00International preliminary examination fee (37 CFR 1.482) paid to USPTO  
and all claims satisfied provisions of PCT Article 33(1)-(4) ..... \$100.00**ENTER APPROPRIATE BASIC FEE AMOUNT =****CALCULATIONS PTO USE ONLY**

\$ 860.00

Surcharge of \$130.00 for furnishing the oath or declaration later than ☐ 20 ☐ 30  
months from the earliest claimed priority date (37 CFR 1.492(e)).

\$

CLAIMS

NUMBER FILED

NUMBER EXTRA

RATE

\$

Total claims

- 20 =

0

x \$18.00

\$

Independent claims

- 3 =

3

x \$80.00

\$

240.00

MULTIPLE DEPENDENT CLAIM(S) (if applicable)

+ \$270.00

\$

**TOTAL OF ABOVE CALCULATIONS =**

\$ 1,100.00

☒ Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above  
are reduced by 1/2.

\$

+

**SUBTOTAL =**

\$ 950.00

Processing fee of \$130.00 for furnishing the English translation later than ☐ 20 ☐ 30  
months from the earliest claimed priority date (37 CFR 1.492(f)).

\$

**TOTAL NATIONAL FEE =**

\$ 950.00

Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be  
accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property +

\$

40.00

**TOTAL FEES ENCLOSED =**

\$ 990.00

Amount to be  
refunded:

\$

charged:

\$

- a. ☐ A check in the amount of \$ \_\_\_\_\_ to cover the above fees is enclosed.
- b. ☒ Please charge my Deposit Account No. 08-0219 in the amount of \$ 990.00 to cover the above fees.  
A duplicate copy of this sheet is enclosed.
- c. ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any  
overpayment to Deposit Account No. 08-0219. A duplicate copy of this sheet is enclosed.
- d. ☐ Fees are to be charged to a credit card. **WARNING:** Information on this form may become public. **Credit card  
information should not be included on this form.** Provide credit card information and authorization on PTO-2038.

**NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR  
1.137 (a) or (b)) must be filed and granted to restore the application to pending status.**SEND ALL CORRESPONDENCE TO: WAYNE A. KEOWN, PH.D  
HALE AND DORR, LLP  
60 STATE STREET  
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SIGNATURE

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NAME

33,923

REGISTRATION NUMBER

09/806110

JCO8 Rec'd PCT/PTO 28 MAR 2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Andrew C. Karaplis, et.al.

Serial No.: TBA

Examiner: TBA

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For: Use of PEX in the treatment of Metabolic Bone Diseases

Attorney Docket No.:

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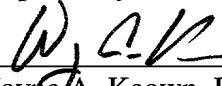
**STATEMENT UNDER 37 C.F.R. §1.821(f)**

Sir:

The diskette enclosed herewith contains a computer readable form of the Sequence Listing for the above-referenced patent application. The material on this diskette is identical in substance to the Sequence Listing filed herewith. The computer readable form of the Sequence Listing contained on this diskette is understood to comply with the requirements of §1.821(f).

Dated: March 28, 2001

Respectfully submitted,

  
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USE OF PEX IN THE TREATMENT OF METABOLIC BONE DISEASESBACKGROUND OF THE INVENTION(a) Field of the Invention

5           The invention relates to the use of *PEX* in the treatment of metabolic bone diseases, such as osteomalacia and osteoporosis.

(b) Description of Prior Art

10           Mutations in the *PEX* gene are responsible for X-linked hypophosphatemic rickets (HYP). To gain insight into the role of *PEX* in normal physiology we have cloned the human full-length cDNA and studied its tissue expression, subcellular localization, and peptidase activity. We show that the cDNA encodes a 749 amino  
15           acid protein structurally related to a family of neutral endopeptidases that include neprilysin (NEP) as prototype. By Northern blot analysis, the size of the full-length *PEX* transcript is 6.5 kb. *PEX* expression, as determined by semi-quantitative PCR, is high in bone  
20           and in tumor tissue associated with the paraneoplastic syndrome of renal phosphate wasting. *PEX* is glycosylated in the presence of canine microsomal membranes and partitions exclusively in the detergent phase from Triton X-114 extractions of transiently transfected COS  
25           cells. Immunofluorescence studies in A293 cells expressing *PEX* tagged with a c-myc epitope show a predominant cell-surface location for the protein with its C-terminal domain in the extracellular compartment, substantiating the assumption that *PEX*, like other members of the neutral endopeptidase family, is a type II  
30           integral membrane glycoprotein. Cell membranes from cultured COS cells transiently expressing *PEX* efficiently degrade exogenously added PTH-derived peptides, demonstrating for the first time that recombinant *PEX*  
35           can function as an endopeptidase. *PEX* peptidase activ-

ity may provide a convenient target for pharmacological intervention in states of altered phosphate homeostasis and in metabolic bone diseases.

X-linked hypophosphatemic rickets (HYP) is the most common inherited disorder of renal phosphate wasting characterized by severe hypophosphatemia, renal phosphate wasting, reduced serum concentrations of 1,25-dihydroxyvitamin D levels, and defective bone mineralization. Until recently, much of our understanding of HYP has been facilitated by the availability of two murine homologues, the *Hyp* and *Gy* mice, which exhibit many of the phenotypic features of HYP. Through positional cloning, however, a gene which spans the deleted region Xp22.1 in HYP patients, or is mutated in non-deletion patients with the disorder, was identified (designated *PEX*) and its partial cDNA sequence reported (The HYP Consortium (1995) *Nature Genetics* **11**, 130-136). The predicted human *PEX* gene product, as well as its murine homologue (Du, L. et al. (1996) *Genomics* **36**, 22-28), exhibit homology to a family of neutral endopeptidases involved in either activation or degradation of a number of peptide hormones. It has been postulated that *PEX* metabolizes a peptide hormone that modulates renal tubular phosphate handling. Such an activity could involve either the processing of a phosphate-reabsorbing hormone precursor to its active form or the inactivation of a circulating phosphaturic factor. These speculations notwithstanding, the physiologic function of the *PEX* gene product and the mechanisms that lead to the renal and skeletal abnormalities of HYP remain to be defined.

Oncogenous hypophosphatemic osteomalacia (OHO) is a rare acquired disorder of phosphate homeostasis with biochemical and physical abnormalities similar to HYP. This syndrome is associated with a variety of his-

5 tologically distinct, usually benign, mesenchymal tumors whose excision promptly reverses the metabolic abnormalities and results in cure of the bone disease. It is generally thought that a factor(s) produced by these tumors promotes phosphaturia and inhibits the renal conversion of 25-hydroxyvitamin D to 1,25-dihydroxyvitamin D. The nature of the phosphaturic substance remains unknown and is likely distinct from both parathyroid hormone (PTH) and calcitonin, two polypeptide hormones known to inhibit the renal tubular reabsorption of phosphorus. Because of the striking similarity in the clinical presentation of patients with OHO and HYP, it is postulated that the factor causing phosphaturia in OHO is the active form of the *PEX* substrate. The identification and characterization of the putative *PEX* substrate, referred to as phosphatonin, however, will require first a better understanding of *PEX* function.

20 To date, there is still a need to understand how local factors produced in the bone regulate bone formation and bone resorption. Derangement of these factors leads to metabolic bone diseases. Pharmacological manipulation of such factors may serve as a novel approach to the treatment of these disorders.

25 It would be highly desirable to be provided with a tool in the treatment of metabolic bone diseases, such as osteomalacia and osteoporosis.

#### SUMMARY OF THE INVENTION

30 One aim of the present invention is to provide a tool in the treatment of metabolic bone diseases, such as osteomalacia and osteoporosis.

Another aim of the present invention is to provide the use of *PEX* in the treatment of metabolic bone diseases, such as osteomalacia and osteoporosis.

Another aim of the present invention is to provide a method of diagnostic of metabolic bone diseases, such as osteomalacia and osteoporosis.

Toward this objective, we have cloned a cDNA encoding the full-length human *PEX* protein, and determined the tissue distribution of *PEX* transcripts. In addition, we have examined the subcellular localization of recombinant *PEX* protein and demonstrated its peptidase activity.

10 In accordance with the present invention there is provided a method for the diagnosis of metabolic bone diseases in a patient, which comprises the step of determining the level of PTHrP in a biological sample of a patient wherein an alteration of PTHrP levels from  
15 that of a normal individual is indicative of metabolic bone diseases and/or metabolic bone diseases predisposition.

In accordance with the present invention there is provided a method for the treatment of metabolic  
20 bone diseases, which comprises administering to a patient a compound for the modulation of *PEX* enzymatic activity.

In accordance with the present invention there is provided the use of a compound for the modulation of  
25 *PEX* enzymatic activity for the manufacture of a medicament for treating metabolic bone diseases.

In accordance with the present invention there is provided a method for the treatment of metabolic bone diseases, which comprises modulating PTH and PTHrP  
30 levels that regulate osteoblast activity in a patient to modulate bone breakdown and bone formation.

In accordance with the present invention there is provided the use of modulation of PTH and PTHrP levels that regulate osteoblast activity for the treatment  
35 of metabolic bone diseases.

In accordance with the present invention there is provided a non-human transgenic mammal to study the role of PEX in bone development and homeostasis, whose germ cells and somatic cells contain a PEX gene construct for expression of PEX in osteoblast consisting essentially of a recombinant PEX gene sequence under the control of a proximal promoter of a pro- $\alpha$ 1(I) collagen gene, the PEX gene construct being introduced into the mammal, or an ancestor of the mammal, at an embryonic stage.

The non-human mammal is preferably a mouse and the proximal promoter is preferably murine pro- $\alpha$ 1(I) collagen gene, more preferably a 2.3 kb fragment thereof.

For the purpose of the present invention the following terms are defined below.

The expression "metabolic bone diseases" includes, without limitation, osteomalacia, osteoporosis, osteopetrosis and Paget's disease.

#### **BRIEF DESCRIPTION OF THE DRAWINGS**

Fig. 1 illustrates PEX mRNA expression in OHO tumors;

Fig. 2A illustrates human PEX cDNA cloned from OHO tumors (SEQ ID NOS:1-2);

Fig. 2B illustrates human PEX and human NEP protein alignment (SEQ ID NOS:3-4);

Fig. 2C illustrates the TMpred output for PEX;

Fig. 3 illustrates PEX expression in human tissues;

Fig. 4 illustrates a Northern blot analysis of PEX mRNA;

Fig. 5 illustrates *in vitro* translation of human PEX cRNA;



Figs. 6A-6B illustrate TRITON™ X-114 extraction and immunofluorescent localization of *PEX*;

Figs. 7A-7C illustrate HPLC analysis of the hydrolysis of [D-Ala<sup>2</sup>,Leu<sup>5</sup>]enkephalin;

5 Figs. 8A-8C illustrate the hydrolysis of PTH-derived peptides by *PEX* endopeptidase activity; and

Fig. 9 illustrates Schematic representation of phosphate handling in the proximal renal tubule in normal, OHO, and HYP states.

10

#### DETAILED DESCRIPTION OF THE INVENTION

##### ***PEX is a Cell Membrane-Associated Protein***

Previous studies have established that NEP, ECE-1  
15 and Kell blood group glycoprotein are integral membrane proteins. We have used extraction with the detergent TRITON™ X-114 and immunochemical localization to examine whether *PEX* is also a membrane-associated protein. For  
20 identification of *PEX*, we generated a construct in which the carboxyl terminus sequences of *PEX* are modified by a human c-myc tag. The epitope tag was inserted immediately upstream of the potential prenylation motif so that any lipid modification of the *PEX* protein may proceed uninterrupted.

25 TRITON™ X-114 is a detergent that forms an aqueous solution at 4°C but separates into hydrophobic and aqueous phases when the temperature is raised to 30-37°C. This property has been used as an indicator of the hydrophobic nature of proteins, with integral membrane proteins  
30 partitioning exclusively in the detergent phase while highly hydrophilic proteins associate with the aqueous phase. TRITON™ X-114 extracts from COS-7 cells transiently expressing *PEX* tagged with the c-myc epitope showed that *PEX* partitions nearly exclusively into the  
35 detergent phase. This finding indicates that *PEX* is a

membrane-associated protein and is consistent with the prediction from sequence analysis that it is an integral membrane protein.

To determine the subcellular localization of *PEX*, the distribution of recombinant protein expressed in stably transfected A293 cells was examined using immunofluorescence. When cells were fixed and permeabilized, myc-tagged *PEX* immunostaining was detected primarily on the cell surface, but in a number of cells staining was also observed intracellularly, although no signal was observed in the nucleus. If permeabilization was omitted, staining was localized exclusively to the plasma membrane, while untransfected cells or cells transfected with vector alone showed no immunofluorescent staining. Since the myc-tag was inserted in the carboxyl end of *PEX*, these findings further corroborate the sequence-based prediction that *PEX* is a Type II integral membrane protein with its large C-terminal hydrophilic domain containing the active enzymatic site in the extracellular compartment.

#### 20 ***Recombinant PEX protein has peptidase activity***

The subcellular localization and sequence similarity between *PEX* and *NEP* strongly suggest that *PEX* functions as a membrane-bound metallopeptidase. However, no peptidase activity has yet been ascribed to *PEX*. As shown, when [D-Ala<sup>2</sup>, Leu<sup>5</sup>] enkephalin, used to assay for *NEP* activity, was incubated with cell membrane preparations from vector-transfected COS cells or COS cells expressing equivalent amounts of recombinant human *NEP* or *PEX* proteins, as determined by Western blot analysis, production of Tyr-D-Ala-Gly from the substrate was evident only in *NEP*-expressing membrane preparations. While the *PEX* sequence preserves two of the residues critical for catalytic activity of *NEP* (equivalent to E<sup>646</sup> and H<sup>711</sup>), it lacks a residue equivalent to R<sup>102</sup> shown to be crucial for the dipeptidylcarboxypeptidase activity of *NEP*. Therefore,

unlike NEP, *PEX* has no dipeptidylcarboxypeptidase activity.

To test for peptidase activity of recombinant *PEX*, cell membrane preparations from vector-transfected COS cells or COS cells expressing recombinant *PEX* protein were incubated with human parathyroid hormone PTH (1-34) and PTH (1-38). As shown, *PEX* activity was able to degrade both peptides in a very characteristic pattern. Therefore, *PEX* functions as an endopeptidase, and more specifically we have shown for the first time that it degrades PTH. PTH is the first and only known substrate of *PEX*. These observations make two important points:

*PEX* is a membrane bound protein with its active enzymatic site in the extracellular compartment. The cells with the highest level of *PEX* expression are the osteoblasts (bone forming cells). These cells are also the site of action of circulating PTH at the level of the bone. PTH stimulates these cells to produce factors (nature unknown) which in turn stimulate other bone cells, specifically the osteoclasts, to break down bone. Since *PEX* likely inactivates PTH in contact with osteoblasts, it would result in decreased stimulation of osteoclasts and therefore less bone breakdown.

Alternatively, osteoblasts produce parathyroid hormone-related peptide, PTHrP, which is important in the development of normal bone density. PTHrP shares many of the structural features of PTH and may therefore also serve as substrate for *PEX*. Our previous studies using PTHrP heterozygous-null mice generated by gene targeting have shown that decreased levels of PTHrP in the skeletal microenvironment lead to a premature form of osteoporosis. *PEX* in osteoblasts may therefore modulate local PTHrP levels and thus bone formation. Inhibition of *PEX* enzymatic activity may allow higher local concentrations of PTHrP and therefore better bone formation.

By examining PTH breakdown fragments, we can now design peptide and non-peptide activators and inhibitors of *PEX* enzymatic activity.

By modulating PTH and PTHrP levels that regulate osteoblast activity, *PEX* may play a critical role in the pathogenesis of osteomalacia and osteoporosis. By pharmacological modulation of *PEX* activity, it will be possible to modulate bone breakdown and bone formation. This would be a totally novel approach to the treatment of these metabolic bone diseases.

### Experimental procedure

#### Tumor Tissues

Patient I was a 55 year-old woman who presented with a two-year history of progressively increasing bone pain and difficulty in walking. X-rays of the lumbosacral spine showed diffuse osteopenia. Biochemical investigation showed the serum calcium level to be normal while serum phosphorus was low (0.41 to 0.57 mmol/L; normal, 0.8-1.6 mmol/L). Alkaline phosphatase was 232 U/L (normal, 30-105 U/L) and tubular reabsorption of phosphate while the patient was hypophosphatemic was decreased to 63% (normal, >80%). A search for a tumor was negative and the patient was treated with 1,25-dihydroxyvitaminD3 and oral phosphate. Five years later a right hand mass was discovered and was surgically removed. On histopathological examination, it was a fibrous hemangioma. Postoperatively, the patient noted increasing strength in her lower extremities and marked decrease in her pain. The serum phosphorus normalized (0.96 mmol/L) and the tubular reabsorption of phosphate improved but did not completely normalize (71-76%). No recurrence of the tumor has been found ten years later.

Patient II was a 21 year old man with classic features of OHO. Resection of a benign extraskeletal

- 10 -

chondroma from the plantar surface of the foot resulted in complete reversal of the biochemical and clinical abnormalities associated with the syndrome.

5 Tumor tissue obtained from these two patients at surgery was frozen immediately in liquid nitrogen and stored at -70°C.

#### **PEX Expression in OHO-Associated Tumors**

10 RNA was extracted from tumor tissue using the RNeasy™ Total RNA kit (Qiagen, Chatsworth, CA) and reverse transcribed using oligo(dT) primer and Superscript II (BRL) reverse transcriptase for 1 hour at 42°C in a final reaction volume of 30 µl. The resulting cDNA was then amplified using human PEX-specific oligo-nucleotide primers PEX-1 (5'-GGAGGAATTGGTTGAGGGCG -3' SEQ ID NO:5) and PEX-2 (5'-GTAGACCACCAAGGATCCAG -3' SEQ ID NO:6), designed from the published cDNA sequence (1298 and 1807 are the nucleotide positions of the 5' end of the sense and antisense primers, respectively) (The HYP Consortium (1995) Nature Genetics 11, 130- 20 136). Following amplification (35 cycles), an aliquot of the PCR reaction was fractionated on an 1% agarose gel and visualized following staining with ethidium bromide.

#### **Cloning of Full-Length PEX cDNA**

25 Cloning of the 5' end of PEX cDNA was accomplished by anchored PCR. Total cellular RNA was extracted from tumor II and mRNA was prepared. 1.5 µg of mRNA was reverse transcribed into cDNA using 100 ng of a PEX-specific antisense oligomer (PEX-2) and 200 30 units of Superscript II (BRL) reverse transcriptase for 1 hour at 42°C in a final reaction volume of 30 µl. The resulting cDNA was size fractionated on a 1% agarose gel and fragments corresponding to >600 bp were purified and resuspended in H<sub>2</sub>O. The 3' end of the first 35 strand cDNA was homopolymer tailed with dGTP using 1 µl

of Terminal deoxynucleotidyl transferase (TdT) at 37°C for 30 minutes in a volume of 50 µl. Following heat inactivation of the enzyme, the RNA template was removed by incubation with RNase H and the tailed cDNA was purified by phenol-chloroform extraction followed by ammonium acetate precipitation. The purified tailed cDNA was resuspended in H<sub>2</sub>O and an aliquot was used for anchored PCR analysis along with 200 ng of an internal *PEX* specific antisense primer (*PEX*-3, 5'-CGTGCCCGAAGTGGGTGCCACC-3' (SEQ ID NO:7); nucleotide 98 of the published human cDNA sequence is the 5' end of the primer) and 200 ng of oligodC as the sense primer. Forty cycles of PCR were performed using 0.5 µl of Taq polymerase (Promega Biotec, Madison, WI) in a reaction volume of 50 µl. Cycling parameters were: 1 minute of denaturation at 94°C, 2 minutes of annealing at 55°C and 2 minutes of extension at 72°C. The PCR products were fractionated on a 1% agarose gel and a band of 700 bp was isolated, purified, and ligated into pPCRII vector (Invitrogen). Following transformation into INVαF' bacteria, clones containing the appropriate size insert were sequenced.

To clone the 3' end of *PEX* cDNA, an aliquot of an amplified unidirectional cDNA library in pCDNA3 vector (Invitrogen) generated from mRNA obtained from tumor I was grown overnight in LB medium and plasmid DNA extracted. DNA (0.5 µg) was subjected to PCR using a *PEX*-specific sense oligomer (*PEX*-1) and an antisense oligomer corresponding to the SP6 RNA polymerase binding site sequences present in the pCDNA3 vector. Thirty-five cycles of amplification were performed in a 50 µl reaction volume with each cycle consisting of 1 min denaturation at 94°C, 1 min annealing at 55°C and 1 min extension at 72°C. Amplified products were fractionated on a 1% agarose gel and a 1.2 kb fragment cor-

responding to the 3' end of *PEX* cDNA was subcloned and sequenced.

For expression studies, an *EcoRV* (in the polylinker of pPCRII) /*AccI* (in the *PEX* sequence) fragment containing the 5' end of *PEX* cDNA was ligated into the pPCRII vector containing the 3' end of *PEX* cDNA following digestion with *AccI* and *EcoRV*. The resulting plasmid was restricted with *KpnI* and *NotI* excising the full length *PEX* cDNA that was then inserted into pCDNA3 vector digested at the *KpnI*/*NotI* sites in the polylinker region, resulting in plasmid p*PEX*. The full-length *PEX* cDNA was sequenced using an Applied Biosystems 373A automated sequencer.

#### ***Tissue Expression of PEX mRNA***

*PEX* expression was examined in normal human tissues and in the Saos-2 human osteoblastic osteosarcoma cell line, by RT-PCR using oligonucleotides *PEX*-4 (5'-CTGGAT-CCTTGGTGGTCTAC-3' SEQ ID NO:8) and *PEX*-5 (5'-CACTGTGCAACTGTCTCAG-3' SEQ ID NO:9) as sense and antisense primers (2398 and 2895 are the nucleotide positions of the 5' end of these primers designed from the full-length human *PEX* cDNA). Semiquantitative PCR analysis for *PEX* expression in human tissues was performed as previously described, following normalization for *GAPDH* message in all samples containing *PEX* transcripts.

#### ***Northern-blot Analysis***

Total RNA was obtained from Tumor I and human Saos-2 osteosarcoma cells using the RNeasy Total RNA kit (Qiagen) and oligo(dT)-purified poly(A)<sup>+</sup> RNA was isolated from Saos-2 total RNA using standard procedures. Twenty micrograms of Tumor I total RNA and 20 µg of Saos-2 poly(A)<sup>+</sup> RNA were fractionated on 1% denaturing agarose gel, and transferred to nylon membrane (Hybond N<sup>+</sup>, Amersham). Hybridization was performed with

<sup>32</sup>P-labeled full-length human *PEX* cDNA (3.1 kb) in 7 mM Tris-HCl, 50% formamide, 10% dextran sulfate, 4 X SSC, 2 x Denhardt's solution and heat-denatured salmon sperm DNA (100 µg/ml). The blot was washed in 0.1 X SSC, 0.1% SDS for 20 min at 50°C, and subjected to autoradiography for 4 days.

***In Vitro Transcription, Translation, and Analysis of Products***

Plasmid pPEX was linearized with NotI and sense RNA strand was transcribed using T7 RNA polymerase. Translation reactions in rabbit reticulocyte lysate were performed in the presence of [<sup>3</sup>H]leucine according to the manufacturer's recommendations (Promega) with or without canine pancreas microsomal membranes. Products were analyzed by SDS-polyacrylamide gel electrophoresis (SDS-PAGE; 8%). Autoradiography was performed after treating the gel with EN<sup>3</sup>HANCE (Dupont NEN), as previously described.

***Generation of myc-tagged PEX, Transfection in COS-7 Cells, and Triton X-114 Extraction***

Plasmid pPEX-myc was generated by PCR amplification of *PEX* cDNA using oligonucleotide *PEX*Myc1 as the sense primer (5'-TTGGATGTCAACGCCTCG -3' SEQ ID NO:10, 519 is the nucleotide position of the 5' end of this primer designed from the cloned human *PEX* cDNA) and *PEX*Myc2 as the antisense (5'-CTACCACAATCTACAGTTGTT-CAGGTCTCTTCGCTAATCAGCTTTTGTTCATAGAGTCCATGCCTCTG-3' SEQ ID NO:11) primer. The latter encodes the human c-myc tag sequences (underlined) and *PEX* sequences corresponding to the carboxyl terminal of the mature protein (<sup>742</sup>RGMDSMEQKLISEEDLNNCRLW\*). Following PCR, the amplified fragment was ligated to the pPCR II vector, excised by digestion with KpnI/NotI and inserted into the corresponding sites in the polylinker region of pCDNA3. The in-frame fusion protein was verified by DNA sequencing.



COS-7 cells maintained in Dulbecco's modified Eagle's medium (DMEM, 4,500 mg/L glucose with L-glutamine; JRH Biosciences, Lenexa, KS) supplemented with 10% fetal calf serum (FCS; GIBCO) and antibiotics (pen/strep) were plated at a density of  $3 \times 10^5$  cells/well in 6-well cluster plates 24 h prior to transfection. Cells were washed twice with PBS and incubated with 2  $\mu$ g of pPEX-myc plasmid DNA in 1 ml of DMEM containing 0.1% BSA, and DEAE-dextran (Pharmacia LKB) for 3.5 h at 37°C. Following incubation, the transfection medium was aspirated, the cells were shocked with 10% DMSO in PBS for 2 min, and then cultured in DMEM with 10% calf serum at 37°C for 48 h. Triton X-114 extraction were performed on cultured cells expressing myc-tagged PEX as described. The samples were then analyzed by immunoblotting using the 9E10 anti-myc monoclonal antibody.

***Stable Transfection of A293 Cells and Immunofluorescence***

A293 cells maintained in DMEM with 10% FCS were transfected with the pPEX-myc plasmid by electroporation and selection initiated using G418 (600 mg/ml for 14 days and then decreased to 400 mg/ml). Populations of stably transfected cells were recovered at the end of the selection period. For myc-tagged PEX indirect immunofluorescence, stably transfected cells plated on gelatin-coated coverslips were washed twice with PBS, fixed in 4% paraformaldehyde and in some experiments permeabilized with 0.5% Triton X-100. Cells were blocked with 10% FCS in DMEM for 30 min, washed and incubated for 1 hr at 37°C with the 9E10 anti-myc monoclonal antibody (1:500 dilution). Cells were subsequently washed and incubated in turn with fluorescein-conjugated sheep anti-mouse secondary antibody (1:250 dilution). Coverslips were rinsed extensively with PBS, mounted in medium (glycerol:Tris; 1:1) containing 2.5%

1,4-diazabicyclo-(2,2,2) octane (Sigma) and examined with fluorescent microscopy using appropriate filters.

**Assay for membrane-bound endopeptidase activity**

COS-7 cells transiently transfected with pCDNA3  
5 vector alone, with vector containing human NEP cDNA  
(generous gift of P. Crine, Université de Montréal), or  
with pPEX plasmid, were washed and scraped in PBS. Fol-  
lowing brief centrifugation, the cell pellets were  
10 resuspended in 50 mM Tris-HCl, pH 7.4 and disrupted by  
sonication. Homogenates were fractionated by sequential  
centrifugation at 1,000 x g for 10 min and then at  
100,000 x g for 60 min. The final precipitate was  
washed with 50 mM Tris-HCl, pH 7.4, resuspended in the  
same buffer, and assayed for endopeptidase activity.  
15 The protein concentration in membrane fractions was  
determined by the method of Bradford with bovine serum  
albumin as standard.

[D-Ala<sup>2</sup>,Leu<sup>5</sup>] enkephalin (500 µM) was incubated  
with COS cell membrane preparations (~60 µg of protein)  
20 in 100 mM Tris-HCl, pH 7.0, at 37°C for 30 min (final  
volume 30 µl). The reaction was terminated by the addi-  
tion of 100 µl 0.1% TFA (v/v). Production of Tyr-D-Ala-  
Gly was monitored using reversed-phase HPLC (Bondpak C-  
18 reverse phase column, Waters) with a U.V. detector  
25 set at 214 nm. A linear solvent gradient of 0% B to 40%  
B in 60 min was used with a flow rate of 1.5 ml/min  
(mobile phase A=0.1% TFA (v/v); mobile phase B=80% ace-  
tonitrile/0.1% TFA). Tyr-D-Ala-Gly was identified by  
co-chromatography with marker synthetic peptide. For  
30 assessing PEX endopeptidase activity, 10 µg of PTH [1-  
38] and PTH [1-34] peptides (Peninsula Laboratories;  
Belmont, CA) were added to the membrane preparations.  
For HPLC analysis of hydrolysis products, a linear sol-  
vent gradient of 0% to 50% solution B was used at a

rate of 1.5 ml/min. MALDI-TOF mass spectrometry was performed on specific peptide fragments.

## **RESULTS**

### ***Cloning of Human PEX cDNA***

5           At the initiation of these studies, *PEX* expression had been reported in minute amounts only in leukocytes and fetal brain. We postulated that in states of hypophosphatemia *PEX* expression may be increased and therefore opted to use the OHO tumor as a tissue source  
10   that may express considerably more *PEX*. Tissues obtained from two tumors associated with OHO were used to obtain total RNA and analysis for *PEX* mRNA expression was assessed by RT-PCR. As shown in Fig.1, *PEX* transcripts were readily amplified from both tumor sam-  
15   ples demonstrating the expected 509 bp fragment predicted from the published partial human *PEX* sequence (The HYP Consortium (1995) *Nature Genetics* **11**, 130-136). Total RNA extracted from two tumors associated with OHO was reverse transcribed and amplified by PCR  
20   (35 cycles) using human *PEX*-specific primers, *PEX*-1 and *PEX*-2, designed from the published human sequence. The expected 509 bp amplified fragment was obtained from both tumor samples. Control, no cDNA added to the amplification reaction, i.e. negative control; Marker,  
25   Φ174 DNA digested with HaeIII restriction endonuclease.

          The cloning of the 3' end of *PEX* transcript was performed by rapid amplification of the 3' end of the cDNA (3' RACE), while the 5' of the cDNA was amplified by anchored PCR, as described in Experimental Proce-  
30   dures. Fig. 2A shows the nucleotide and predicted amino acid sequence of the full-length human *PEX* cDNA cloned from tumor tissues. Nucleotide and deduced amino acid sequence of tumor-derived human *PEX* cDNA (Fig. 2A). The numbering begins at the 5' end nucleotide as determined  
35   by anchored PCR. Amino acids are given below each codon

using the single letter code. The putative start codon is indicated as /1 along with the deduced amino acid translation. Two stop codons preceding the predicted initiation ATG are in bold type. Asterisk (\*) indicates an in-frame stop codon, while a large asterisk (\*) denotes the putative prenylation site. A potential polyadenylation signal in the 3' untranslated region is underlined. Nine potential N-glycosylation sites are boxed. The sequence has been assigned GenBank accession No. (U82970).

The composite cDNA reveals a single open reading frame encoding a protein of 749 amino acids which displays homology (34.2% identity, 70% similarity) to human neprilysin (NEP; EC 3.4.24.11), and other members of the membrane-bound metalloendopeptidase family encompassing endothelin-converting enzyme-1 (ECE-1; 66% similarity) and the Kell antigen (60% similarity), suggesting that *PEX* is a novel member of this family of neutral endopeptidases, as previously suggested (The HYP Consortium (1995) *Nature Genetics* **11**, 130-136). Like the other members, *PEX* is a likely a glycoprotein with eight potential N-glycosylation sites and 10 cysteine residues that may be important for the proper folding and hence native conformation of the protein.

The ATG codon at position 604 was assigned as the initiator methionine since it is preceded by two in-frame TGA termination codons 36 and 63 basepairs upstream and conforms favorably to the Kozak consensus for vertebrate initiation of translation. The cloned cDNA identifies the first 3 and the last 108 amino acids of the predicted *PEX* gene product in addition to the published partial sequence. These additional amino acids comprise residues such as E<sup>642</sup> and H<sup>710</sup> that are shared by NEP, and may be critical for the formation of the active site of the protein and hence its enzymatic

activity. Three amino acid residues predicted from our cDNA clone differ from the published partial human *PEX* sequence, D363A (GAC to GCC), R403W (AGG to TGG), and A641G (GCG to GGA). To confirm that these alterations did not arise because of PCR errors, *PEX* sequences were amplified from Saos-2 human osteosarcoma cells (see below) and sequenced. In addition, the same alterations were subsequently described in the murine *PEX* cDNA, suggesting possible cloning artifacts in the published partial human *PEX* sequence. Our cloned sequences also encompass 603 nucleotides of the 5' untranslated region, and 276 nucleotides of the 3' untranslated region, including the canonical polyadenylation signal AATAAA, 19 nt upstream of the poly(A) tract. The human and the published mouse *PEX* cDNA sequences share extensive homology within the protein coding region (96% identity) as well as in the 5' and 3' non coding regions.

TMpred analysis of the human *PEX* sequence predicts that the protein has no apparent N-terminal signal sequence but has a single membrane-spanning helical domain comprising amino acid residues 21-39 (Fig. 2C). TMpred analysis of the *PEX* sequence showing a single membrane-spanning domain encompassing amino acid residues 21-39 (arrowhead). Numbers on the horizontal axis refer to the amino acid sequence. Amino acid homology between *PEX* and human NEP cDNA (Fig. 2B). Sequence comparison was performed using the LALIGN program.

This predicts its transmembrane topology to be that of a type II integral membrane protein with a 20-residue N-terminal cytoplasmic tail and a C-terminal of 700 amino acid residues containing the catalytic domain in the extracellular compartment. Unexpectedly, a CXXX box motif comprising amino acid residues 746CRLW was also identified at the carboxyl terminus of *PEX*. This

motif may serve as a site for prenylation, a post-translational lipid modification involved in a number of processes including facilitating membrane attachment, targeting of proteins to specific subcellular membrane compartments, promoting protein-protein interactions and regulating protein function.

#### ***Tissue Expression of PEX mRNA***

We next examined *PEX* expression in a number of fetal and adult tissues and compared the level of expression to OHO tumor RNA using semi-quantitative RT-PCR (Fig. 3). Quantitative RT-PCR amplification of the *PEX* transcripts from total RNA prepared from human tissues and OHO-associated tumor. Relative expression levels for the *PEX* transcript were measured by quantifying *PEX* product in reversed-transcribed RNA samples that have been previously normalized for GAPDH levels. The specific primers used were as follows: for *PEX*, the forward primer was *PEX*-4 and the reverse primer *PEX*-5; for GAPDH, the primers were as previously described. PCR products were electrophoresed on a 1.5% agarose gel and stained with ethidium bromide. Control, negative control; Marker,  $\Phi$ 174 DNA digested with HaeIII restriction endonuclease. Below, shown are the relative levels of *PEX* transcripts in various human tissues compared to those in the tumor.

*PEX* transcripts were expressed in human fetal calvarium and to a lesser degree in fetal kidney and skeletal muscle while no expression was apparent in fetal liver. *PEX* expression was also observed in the human osteoblastic osteosarcoma cell line, Saos-2. In adult tissues, *PEX* mRNA was identified in kidney, but not in liver, or endomyocardium. Recent studies have also reported *PEX* expression in human fetal bone, skeletal muscle, and liver as well as fetal and adult ovary and lung (Beck, L. et al. (1997) *J. Clin. Invest.*

99, 1200-1209; Grieff, M. et al. (1997) *Biochem. Biophys. Res. Commun.* **231**, 635-639). Analysis following normalization for *GAPDH* message in all tissues containing *PEX* transcript disclosed that bone *PEX* expression is 2-10 fold higher than in other normal tissues examined. In comparison, OHO tumor *PEX* expression was twice the levels observed in fetal calvarium, consistent with its relative "overabundance" in these tissues.

#### **Northern Blot Analysis**

10 To determine the size of the full-length *PEX* transcript, we isolated total RNA from tumor I (quantity of available tissue was insufficient for poly(A)<sup>+</sup> RNA extraction) and poly(A)<sup>+</sup> RNA from human Saos-2 osteosarcoma cells. This cell line was used since it is  
15 readily available and successful amplification of *PEX* sequences has been performed by RT-PCR (see above). Aliquots (20 µg of each) were examined by Northern-blot analysis using the cloned human *PEX* cDNA as probe. A  
20 single transcript of approximately 6.5 kb was readily detected only in the Saos-2-derived poly(A)<sup>+</sup> sample and contrasts with the predicted size of the cloned sequence of 3.1 kb (Fig. 4). Approximately 20 µg of poly(A)<sup>+</sup> RNA prepared from Saos-2 cells and 20 µg of total RNA prepared from tumor I tissue were resolved on  
25 1% agarose gel containing formaldehyde and then transferred to a nylon membrane. Following hybridization with radiolabeled *PEX* cDNA, the blot was washed and the signal detected by autoradiography. A transcript of ~6.5 kb was observed only in the lane containing Saos-2  
30 poly(A)<sup>+</sup> RNA. There is suggestion of an additional band corresponding to a transcript of ~3.8 kb. Arrows indicate the position of the 28S (approx. 4.8 kb) and 18S (approx. 1.8 kb) ribosomal RNA.

This finding would therefore predict a ~4 kb 5' untranslated region for *PEX* cDNA, consistent with pub-  
35

lished data from Northern blot analysis of *PEX* expression in mouse calvaria (Du, L. et al. (1996) *Genomics* **36**, 22-28). A less well defined band was also detected in the Saos-2 sample corresponding to a potential transcript of ~3.8 kb, although the nature of this transcript remains unclear. Northern analysis of total RNA samples from tumor I and Saos-2 cells (results not shown) did not reveal any signal for *PEX*, consistent with the relatively low expression levels of the *PEX* transcript, previously described (The HYP Consortium (1995) *Nature Genetics* **11**, 130-136; Beck, L. et al. (1997) *J. Clin. Invest.* **99**, 1200-1209; Grieff, M. et al. (1997) *Biochem. Biophys. Res. Commun.* **231**, 635-639). This finding contrasts sharply with *PEX* expression levels demonstrated in murine calvaria and cultured osteoblasts (Du, L. et al. (1996) *Genomics* **36**, 22-28) and may reflect tissue and species differences.

#### ***In vitro translation of PEX cRNA***

*In vitro* translation studies using full-length human *PEX* cRNA were performed in the rabbit reticulocyte lysate cell-free system. In the absence of microsomal membranes, *PEX* cRNA was translated into an ~86 kD protein, as predicted from the cloned cDNA sequence (Fig. 5). Plasmid p*PEX* was linearized and sense RNA strand transcribed using T7 RNA polymerase. Translation of *PEX* cRNA was performed using rabbit reticulocyte lysate in the absence (minus) and presence (plus) of canine pancreas rough microsomes. Products were electrophoresed in a SDS-polyacrylamide gel (10%) and visualized by autoradiography. Arrowhead in lane 2 indicates full-length human *PEX* protein. The addition of microsomal membranes results in the appearance of higher molecular weight forms that likely represent glycosylated products.



Following addition of canine microsomal membranes to the translation mixture, products of higher molecular weight (~100 kD) became apparent, consistent with N-glycosylation of *PEX* at the eight potential glycosylation sites deduced from the predicted sequence.

***PEX is a Cell Membrane-Associated Protein***

Previous studies have established that NEP, ECE-1 and Kell blood group glycoprotein are integral membrane proteins. We have used extraction with the detergent Triton X-114 and immunofluorescent localization to examine whether *PEX* is also a membrane-associated protein. For identification of *PEX*, we generated a construct in which the carboxyl terminus sequences of *PEX* are modified by a human c-myc tag. The epitope tag was inserted immediately upstream of the putative prenylation motif so that any potential lipid modification of the *PEX* protein may proceed uninterrupted.

Triton X-114 is a detergent that forms an aqueous solution at 4°C but separates into hydrophobic and aqueous phases when the temperature is raised to 30-37°C. This property has been used as an indicator of the hydrophobic nature of proteins, with integral membrane proteins partitioning exclusively in the detergent phase while highly hydrophilic proteins associate with the aqueous phase. Triton X-114 extracts from COS-7 cells transiently expressing *PEX* tagged with the c-myc epitope showed that *PEX* partitions nearly exclusively into the detergent phase (Fig. 6A). Extraction and partitioning of *PEX* expressed in COS-7 cells with Triton X-114 (Fig. 6A). Plasmid p*PEX*-myc was transiently transfected in COS-7 cells and 48 h later cells were extracted with Triton X-114. Whole cell extracts, as well as detergent and aqueous phases, were analyzed by SDS-PAGE and immunoblotted with an anti-myc monoclonal antibody. Right margin indicates  $M_r \times 10^{-3}$ .

This finding indicates that *PEX* is a membrane-associated protein and is consistent with the prediction from sequence analysis that it is an integral membrane protein.

5 To determine the subcellular localization of *PEX*, the distribution of recombinant protein expressed in stably transfected A293 cells was examined using immunofluorescence. When cells were fixed and permeabilized, myc-tagged *PEX* immunostaining was detected primarily on the cell surface, but in a number of cells staining was also observed intracellularly, although no signal was observed in the nucleus (Fig. 6B). If permeabilization was omitted, staining was localized exclusively to the plasma membrane (Fig. 6C), while untransfected cells or cells transfected with vector alone showed no immunofluorescent staining. Localization of *PEX* using indirect immunofluorescence in stably transfected A293 cells with (Fig. 6B) and without (Fig. 6C) permeabilization with Triton X-100, respectively. Staining was carried out using the 9E10 anti-myc monoclonal antibody, followed by fluorescein-labeled secondary (sheep anti-mouse) antibody. Arrowheads indicate intracellular (B) and plasma membrane staining (C).

Since the myc-tag was inserted in the carboxyl end of *PEX*, these findings further corroborate the sequence-based prediction that *PEX* is a type II integral membrane protein with its large C-terminal hydrophilic domain in the extracellular compartment.

***Recombinant PEX protein has endopeptidase activity***

30 The subcellular localization and sequence similarity between *PEX* and NEP strongly suggest that *PEX* functions as a membrane-bound metallopeptidase. However, no peptidase activity has been ascribed to *PEX*. As shown in Fig. 7A, when [D-Ala<sup>2</sup>, Leu<sup>5</sup>] enkephalin, used to assay for NEP activity, was incubated with cell

membrane preparations from vector-transfected COS cells or COS cells expressing equivalent amounts of recombinant human NEP or *PEX* proteins, as determined by Western blot analysis, production of Tyr-D-Ala-Gly from the substrate was evident only in NEP-expressing membrane preparations. Cell membrane preparations from vector transfected COS-7 cells (Fig. 7A) or from cells transiently expressing human NEP (Fig. 7B) or, human *PEX* cDNAs (Fig. 7C) were incubated in the presence of [D-Ala<sup>2</sup>,Leu<sup>5</sup>]enkephalin (500  $\mu$ M) and hydrolysis products were resolved by HPLC as described in the *Experimental Procedures* section. Tyr-D-Ala-Gly was identified by chromatography of synthetic marker peptide.

While the *PEX* sequence preserves two of the residues critical for catalytic activity of NEP (equivalent to E<sup>646</sup> and H<sup>711</sup>), it lacks a residue equivalent to R<sup>102</sup> shown to be crucial for the dipeptidylcarboxypeptidase activity of NEP. Therefore, unlike NEP, *PEX* has no dipeptidylcarboxypeptidase activity, but likely functions as an endopeptidase.

To examine recombinant human *PEX* for endopeptidase activity, cell membrane preparations from COS cells transiently expressing the protein were incubated with human PTH [1-38] or PTH [1-34] and the cleavage products were analyzed by reverse-phase high pressure liquid chromatography (HPLC), as shown in Fig. 8. Human PTH [1-38] was incubated with cell membrane preparations from vector transfected COS-7 cells (Fig. 8A) or from cells transiently expressing human *PEX* and hydrolysis products were resolved by HPLC (Fig. 8B). Chromatographic profile of products arising from the hydrolysis of PTH [1-34] when incubated with cell membranes from COS-7 cells transiently expressing *PEX* (Fig. 8C). The novel product with a molecular weight of

630 likely corresponds to the terminal pentapeptide DVHNF of human PTH [1-34].

A parallel preparation from vector transfected COS cells did not appreciably cleave PTH [1-38]. However, in the presence of PEX, both PTH peptides were hydrolyzed in a highly reproducible pattern resulting in the formation of several peaks that absorb at 214 nm. Mass spectrometry of the peptide materials recovered from two product peaks gave m/z values of 861 and 630, respectively. While the former product was present in hydrolysates from both PTH [1-38] and PTH [1-34], the latter product was identified only in the PTH [1-34] hydrolysate and likely corresponds to the carboxyl terminal pentapeptide DVHNF of human PTH [1-34]. These findings provide the first direct evidence that recombinant PEX possesses endopeptidase activity and suggest that its substrate specificity may not be restricted to the putative phosphatonin but may include other circulating hormones or perhaps bone-derived autocrine/paracrine regulatory factors that regulate renal phosphate handling.

#### DISCUSSION

To gain insight into the role of PEX in normal physiology we have cloned the human full-length cDNA and studied its expression, subcellular localization, and peptidase activity. The cloned human PEX cDNA encodes a protein whose deduced amino acid sequence is identical to the published partial (The HYP Consortium (1995) *Nature Genetics* **11**, 130-136) and to the full-length sequences reported more recently (Beck, L. et al. (1997) *J. Clin. Invest.* **99**, 1200-1209; Grieff, M. et al. (1997) *Biochem. Biophys. Res. Commun.* **231**, 635-639; Guo, R. and Quarles, L. D. (1997) *J. Bone Miner. Res.* **12**, 1009-1017). Its deduced topology is that of a type II integral membrane glycoprotein and in the pres-

ent study we have provided experimental evidence to support this prediction. We have shown that *PEX* is glycosylated in the presence of canine microsomal membranes and partitions exclusively in the detergent phase following extraction with Triton X-114, consistent with the prediction from sequence analysis that it is an integral membrane glycoprotein. Nevertheless, the observed hydrophobic nature of *PEX*, need not be attributed solely to it being an integral membrane protein. Lipophilic modification is known to cause cell membrane association, presumably through hydrophobic interaction of the modifying group with the lipid bilayer. Signaled by the C-terminal tetrapeptide CRLW motif, post-translational attachment of isoprenoids via a thioether linkage to the cysteine residue would be sufficient to promote effective membrane association. Further studies will be necessary to determine if such lipid modification of *PEX* does indeed take place. Of interest, however, is the observation that a nonsense mutation within this motif (R747Stop) has been reported to cosegregate with HYP and is likely to be associated with an inactive *PEX* gene product. Finally, the localization of *PEX* expressed in A293 cells is also consistent with the protein being membrane-associated and corroborates the sequence-based prediction that *PEX* is a type II integral membrane protein with its large C-terminal hydrophilic domain in the extracellular compartment. While protein expression was detected mostly on the cell surface, in some cells the signal was also localized intracellularly. This localization of the expressed protein would indicate that a portion of *PEX* activity is located in a membrane-bound compartment, possibly the Golgi membranes. The Golgi localization described for ECE-1 activity in cultured endothelial cells is proposed to promote the efficient conversion

of big endothelin-1 because of the co-localization and concentration of enzyme and substrate through the constitutive secretory pathway. It is possible then, that in parallel fashion, the *PEX* enzyme mediates both intracellular and cell-surface conversions of its putative substrate.

The finding that wild-type *PEX* transcripts are expressed in relative overabundance in OHO tumors poses a question in trying to understand the pathophysiology of these disorders. That is, how do we reconcile the apparently disparate observations that overexpression of *PEX* in OHO and loss of function in HYP patients, both lead to similar derangement in phosphate homeostasis? One of the physiological functions of *PEX* may well be the inactivation of a factor that normally promotes renal phosphate excretion (Fig. 9). The diagrams indicate events proposed to occur at the level of the proximal renal tubule. A putative circulating phosphaturic hormone (PHa) interacts with its renal receptor (PR) and inhibits phosphate reabsorption across the renal brush border membrane (-|) by decreasing NaPi activity. Downward arrows indicate the degree of phosphate excretion. *PEX* expressed predominantly in extra-renal tissues modulates the levels of circulating PHa by converting it to its inactive form (PHi).

In patients with OHO, the hyperphosphaturia that characterizes the syndrome would be the consequence of unregulated and excessive elaboration of the phosphaturic factor by the tumor. The modestly elevated *PEX* levels that we have documented in these tumors may arise either in response to the severe hypophosphatemia or to the abnormally high levels of the active phosphaturic factor. Yet, the increased *PEX* expression may not be sufficient to accommodate the increased substrate load, resulting in abnormally high circulating levels of the

active phosphaturic hormone. The inactivation of *PEX* observed in HYP patients would similarly cause decreased turnover of this humoral phosphaturic factor and thereby lead to renal phosphate wasting.

5           This model is also consistent with the observa-  
tion that the *Hyp* phenotype is neither corrected nor  
transferred following cross transplantation of kidneys  
in normal and *Hyp* mice. Thus, when *Hyp* mice are  
engrafted with a normal kidney, phosphaturia ensues  
10 since circulating levels of the phosphaturic agent are  
excessive. On the other hand, engraftment of mutant  
kidneys in normal mice will not affect renal tubular  
phosphate handling of the recipients since circulating  
levels of the phosphaturic substance will be normally  
15 regulated by the enzymatic activity of extrarenal wild-  
type *PEX*. Indeed, analysis of the tissue distribution  
of *PEX* mRNA by RT-PCR has confirmed its expression in  
extrarenal tissues and particularly bone. Our present  
findings and those of others (Du, L. et al. (1996)  
20 *Genomics* **36**, 22-28; Beck, L. et al. (1997) *J. Clin.*  
*Invest.* **99**, 1200-1209; Grief, M. et al. (1997) *Bio-*  
*chem. Biophys. Res. Commun.* **231**, 635-639; Guo, R. and  
Quarles, L. D. (1997) *J. Bone Miner. Res.* **12**, 1009-  
1017) showing high levels of *PEX* expression in cells of  
25 the osteoblast lineage would be consistent with the  
intrinsic osteoblast defect postulated to exist in HYP  
patients and in *Hyp* mice.

Finally, although the deduced structure of *PEX*  
clearly suggests that it is a metalloprotease, no pep-  
30 tidase activity had been ascribed to the protein. The  
preservation of the catalytic glutamate and histidine  
residues (equivalent to E<sup>646</sup> and H<sup>711</sup> of NEP; Fig. 2B)  
would argue for such an activity. In addition, the wide  
range of *PEX* mutations in HYP patients that align with  
35 regions required for protease activity in NEP suggests

that *PEX* also functions as a protease. Here, for the first time, we provide experimental evidence that recombinant *PEX* indeed functions as an endopeptidase. Unlike *NEP*, however, the protein does not possess dipeptidylcarboxypeptidase activity since it lacks a residue equivalent to R<sup>102</sup> of *NEP*. Our unexpected observation that *PEX* effectively degrades *PTH* raises the question of whether circulating *PTH* is the putative phosphatonin. Although extracts from some *OHO* tumors have been reported to stimulate renal adenylate cyclase and this activity was inhibited by *PTH* antagonists, most studies have excluded *PTH* and *PTH*-related peptide (*PTHrP*) activity in *OHO*-associated tumors. Moreover, calcium homeostasis is generally preserved in patients with *HYP*. It is more likely, therefore, that the enzyme is rather promiscuous in its substrate specificity. *PEX* may indeed modulate *PTH* bioavailability and bioactivity, particularly at the level of the osteoblast, as well as the hormonal and paracrine/autocrine effects of factors produced by osteoblasts involved in regulating phosphate reabsorption and osteoblast maturation and mineralization. Although additional work will be required to clarify many of these issues, the availability of full-length human *PEX* cDNA now provides us with the opportunity to study the biology of *PEX*, identify its substrate(s), elucidate its role in pathological states characterized by dysregulated phosphate homeostasis, and determine its suitability as target for therapeutic intervention in the treatment of metabolic bone diseases.

While the invention has been described in connection with specific embodiments thereof, it will be understood that it is capable of further modifications and this application is intended to cover any variations, uses, or adaptations of the invention following,



in general, the principles of the invention and including such departures from the present disclosure as come within known or customary practice within the art to which the invention pertains and as may be applied to the essential features hereinbefore set forth, and as follows in the scope of the appended claims.

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WHAT IS CLAIMED IS:

1. A method for the diagnosis of metabolic bone diseases in a patient, which comprises the step of determining the level of PTHrP in a biological sample of a patient wherein an alteration of PTHrP levels from that of a normal individual is indicative of metabolic bone diseases and/or metabolic bone diseases predisposition.
2. The method of claim 1, wherein said metabolic bone diseases is osteomalacia, osteoporosis, osteopetrosis or Paget's disease.
3. A method for the treatment of metabolic bone diseases, which comprises administering to a patient a compound for the modulation of PEX enzymatic activity modulates PTH and PTHrP levels that regulate osteoblast activity.
4. The method of claim 3, wherein said metabolic bone diseases is osteomalacia, osteoporosis, osteopetrosis or Paget's disease.
5. Use of a compound for the modulation of PEX enzymatic activity for the manufacture of a medicament for treating metabolic bone diseases, wherein said compound modulates PTH and PTHrP levels that regulate osteoblast activity.
6. The use of claim 5, wherein said metabolic bone diseases is osteomalacia, osteoporosis, osteopetrosis or Paget's disease.
7. A method for the treatment of metabolic bone diseases, which comprises modulating PTH and PTHrP levels that regulate osteoblast activity in a patient to modulate bone breakdown and bone formation.

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8. The method of claim 8, wherein said metabolic bone diseases is osteomalacia, osteoporosis, osteopetrosis or Paget's disease.

9. Use of a compound for the modulation of PTH and PTHrP levels that regulate osteoblast activity for the treatment of metabolic bone diseases.

10. The use of claim 9, wherein said metabolic bone diseases is osteomalacia, osteoporosis, osteopetrosis or Paget's disease.

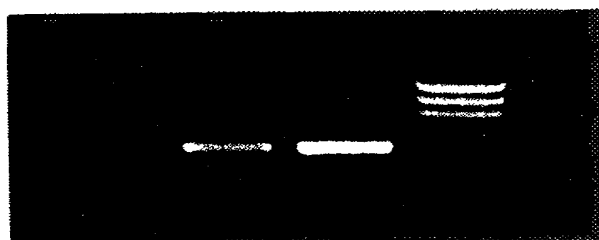
11. A non-human transgenic mammal to study the role of PEX in bone development and homeostasis, whose germ cells and somatic cells contain a PEX gene construct for expression of PEX in osteoblast consisting essentially of a recombinant PEX gene sequence under the control of a proximal promoter of a pro- $\alpha$ 1(I) collagen gene, the PEX gene construct being introduced into the mammal, or an ancestor of the mammal, at an embryonic stage.

12. The non-human mammal of claim 11, which is a mouse and the proximal promoter is murine pro- $\alpha$ 1(I) collagen gene.

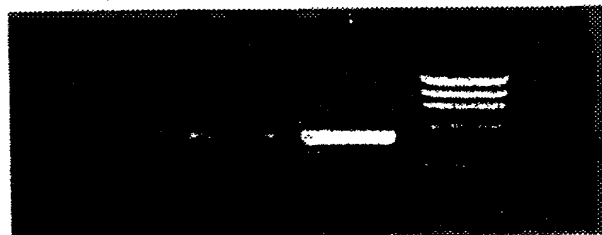
13. The non-human mammal of claim 12, wherein said murine pro- $\alpha$ 1(I) collagen gene is a 2.3 kb fragment thereof.

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Control  
Tumor I  
Tumor II  
Marker



PEX



GAPDH

FIG. 1

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**SUBSTITUTE SHEET (RULE 26)**

09/806110

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721/40 GTG AGT CAA GGT CTC TTA AGT CTC CAA GCT AAA CAG GAG TAC TGC CTG AAG CCA GAA TGC  
 V S Q G L L S L Q A K Q E Y C L K P E C  
 781/60 ATC GAA GCG GCT GCT GCT GGT GAT GGC ATC TTA AGT AAA GTA AAT CTG TCT GTG GAT CCT TGT GAT AAT  
 I E A A A I L S K V N L S V D P C D N  
 841/90 TTC TTC CGG TTC GCT GCT TGT GAT GGC TGG ATA AGC AAT AAT CCA ATT CCC GAA GAT ATG CCA  
 F F R F A C D G W I S N N P I P E D M P  
 901/100 AGC TAT GGG GTT TAT CCT TGG CTG AGA CAT AAT GTT GAC CTC AAG TTG AAG GAA CTT TTG  
 S Y G V Y P W L R H N V D L K L E L L  
 961/120 GAG AAA TCA ATC AGT AGA AGG CGG GAC ACC GAA GCC ATA CAG AAA GCC AAA ATC CTT TAT  
 E K S I S R R D T E A I Q K A K I L Y  
 1021/140 TCA TCC TGC ATG AAT GAG AAA GCG ATT GAA AAA GCA GAT GCC AAG CCA CTG CTA CAC ATC  
 S S C M N E K A I E K A D A K P L L H I  
 1081/160 CTA CGG CAT TCA CCT TTC CGC TGG CCC GTG CTT GAA TCT AAT ATT GGC CCT GAA GGG GTT  
 L R H S P F R W P V L E S N I G P E G V  
 1141/180 TGG TCA GAG AGA AAG TTC AGC CTT CTG CAG ACA CTT GCA ACG TTT CGT GGT CAA TAC AGC  
 W S E R K F S L L Q T L A T F R G Q Y S  
 1201/200 AAT TCT GTG TTC ATC CGT TTG TAT GTG TCC CCT GAT GAC AAA GCA TCC AAT GAA CAT ATC  
 N S V F I R L Y V S P D D K A S N E H I  
FILED - 2A (cont.)

TABLE 33 - CTT 908553

1261/220 1291/230  
 TTG AAG CTG GAC CAA GCA ACA CTC TCC CTG GCC GTG AGG GAA GAC TAC CTT GAT AAC AGT  
 L K L D Q A T L S L A V R E D Y L D N S

1321/240 1351/250  
 ACA GAA GCC AAG TCT TAT CGG GAT GCC CTT TAC AAG TTC ATG GTG GAT ACT GCC GTG CTT  
 T E A K S Y R D A L Y K F M V D T A V L

1381/260 1411/270  
 TTA GGA GCT AAC N S S R A E H D M K S V L R L E I  
 L G A N S S R A E H D M K S V L R L E I

1441/280 1471/290  
 AAG ATA GCT GAG ATA ATG ATT CCA CAT GAA AAC CGA ACC AGC GAG GCC ATG TAC AAC AAA  
 K I A A E I M I P H E N R T S E A M Y N K

1501/300 1531/310  
 ATG AAC ATT TCT GAA CTG AGT GCT ATG ATT CCC CAG TTC GAC TGG CTG GGC TAC ATC AAG  
 M N I S E L S A M I P Q F D W L G Y I K

1561/320 1591/330  
 AAG GTC ATT GAC ACC AGA CTC TAC CCC CAT CTG AAA GAC ATC AGC CCC TCC GAG AAT GTG  
 K V I D T R L Y P H L K D I S P S E N V

1621/340 1651/350  
 GTG GTC CGC GTC CCG CAG TAC TTT AAA GAT TTG TTT AGG ATA TTA GGG TCT GAG AGA AAG  
 V V R V P Q Y F K D L F R I L G S E R K

1681/360 1711/370  
 AAG ACC ATT GCC AAC TAT TTG GTG TGG AGA ATG GTT TAT TCC AGA ATT CCA AAC CTT AGC  
 K T I A N Y L V W R M V Y S R I P N L S

1741/380 1771/390  
 AGG CGC TTT CAG TAT AGA TGG CTG GAA TTC TCA AGG GTA ATC CAG GGG ACC ACA ACT TTG  
 R R F Q Y R W L E F S R V I Q G T T' T L

TABLE 33 - 2A (cont.)

1801/400 1831/410 1861/420 1891/430 1921/440 1951/450 2011/470 2071/490 2131/510 2191/530 2251/550 2311/570

CTG CCT CAA TGG GAC AAA TGT GTA AAC TTT ATT GAA AGT GCC CTC CCT TAT GTT GTT GGA  
L P Q W D K C V N F I E S A L P Y V V G

AAAG ATG TTT GTA GAT GTG TAC TTC CAG GAA GAT AAG AAG GAA ATG ATG GAG GAA TTG GTT  
K M F V D V Y F Q E D K K E M M E E L V

GGAG GGC GTT CGC TGG GCC TTT ATT GAC ATG CTA GAG AAA GAA AAT GAG TGG ATG GAT GCA  
E G V R W A F I D M L E K E N E W M D A

GGGA ACG AAA AGG AAA GCC AAA GAA AAG GCG AGA GCT GTT TTG GCA AAA GAT GGC TAT CCA  
G T K R K A K E A R A V L A K V G Y P

GAG TTT ATA ATG AAT GAT ACT CAT GTT AAT GAA GAC CTC AAA GCT ATC AAG TTT TCA GAA  
E F I M N T H V N E D L K A I K F S E

GGC GAC TAC TTT GGC AAC GTC CTA CAA ACT CGC AAG TAT TTA GCA CAG TCT GAT TTC TTC  
A D Y F G N V L Q T R K Y L A A Q S D F F

TGG CTA AGA AAA GCC GTT CCA AAA ACA GAG TGG TTT ACA AAT CCG ACG ACT GTC AAT GCC  
W L R K A V P K T E W F T N P T T V N A

TTC TAC AGT GCA TCC ACC AAC CAG ATC CGA TTT CCA GCA GGA GAG CTC CAG AAG CCT TTC  
F Y S A S T N Q I R F P A G E L Q K P F

TGG GGA ACA GAA TAT CCT CGA TCT CTG AGT TAT GGT GCT ATA GGA GTA ATT GTC GGA  
F W G T E Y P R S L S Y G A I G V I V G



TTTTGGTGTGGGG

2341/580 2371/590  
 CAT GAA TTT ACA CAT GGA TTT GAT AAT AAT GGT AGA AAA TAT GAT AAA AAT GGA AAC CTG  
 H E F T H G F D N N G R K Y D K N G N L  
 2401/600 2431/610  
 GAT CCT TGG TGG TCT ACT GAA TCA GAA GAA AAG TTT AAG GAA AAA ACA AAA TGC ATG ATT  
 D P W W S T E S E E K F K E K T K C M I  
 2461/620 2491/630  
 AAC CAG TAT AGC AAC TAT TAT TGG AAG AAA GCT GGC TTA AAT GTC AAG GGG AAG AGG ACC  
 N Q Y S N Y W K K A G L N V K G K R T  
 2521/640 2551/650  
 CTG GGA GAA AAT ATT GCT GAT AAT GGA GGC CTG CGG GAA GCT TTT AAG GCT TAC AGG AAA  
 L G E N I A D N G G L R E A F R A Y R K  
 2581/660 2611/670  
 TGG ATA AAT GAC AGA AGG CAG GGA CTT GAG GAG CCT CTT CTA CCA GGC ATC ACA TTC ACC  
 W I N D R R Q G L E E P L L L P G I T F T  
 2641/680 2671/690  
 AAC AAC CAG CTC TTC CTC AGT TAT GCT CAT GTG AGG TGC AAT TCC TAC AGA CCA GAA  
 N N Q L F F L S Y A H V R C N S Y R P E  
 2701/700 2731/710  
 GCT GCC CGA GAA CAA GTC CAA ATT GGT GCT CAC AGT CCC CCT CAG TTT AGG GTC AAT GGT  
 A A R E Q V Q I G A H S P P Q F R V N G  
 2761/720 2791/730  
 GCA ATT AGT AAC TTT GAA GAA TTC CAG AAA GCT TTT AAC TGT CCA CCC AAT TCC ACG ATG  
 A I S N F E E F Q K A F N C P P N S T M  
 2821/740 2851  
 AAC AGA GGC ATG GAC TCC TGC CGA CTC TGG TAG CTG GGA CGC TGG TTT ATG GCA TCC TGA  
 N R G M D S C R L W

TTT - 2A (cont.)

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2881  
 GAC AGT TGC ACA GTG CCA GCG GAG GCT GCA CTG AGC CTT CAT CGC CCA TTG CTT TAG GCC  
 2941  
 TGG AGG AGC TTT CAT TTT TAG TGC ATT TTC ATT ATT TGG GTA GGT GAC CTG CTT GGA TCT  
 3001  
 AGA CAG CAT CTG TTC AAA GTT GTA GGG CTT ATA AAG TGG AAT ATA AGA AGA ACT AAG TAT  
 3051  
 GTT TCT TTA GAA AAT CAA ACC AAC AAA AAT AAA TCC CTA GGC TAC TTT TGT TAA AAA AAA  
 3121  
 AAA AAA AAA A

~~7/18~~ - 2A (cont.)

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hPEX	10	20	30	40	50	60
	EAETGSSVETGKKANRGTRIALVVFVGTTVLGTILFLVSQGLLSLQAKQEYCLKPECIE					
	:.....	:.....	:.....	:.....	:.....	:.....
hNEP	ESQMDITDINTPKPKKKQRWTPPLEISLSVLVLLLTIIAVTMIALYATYDDGICKSSDCIK					
	10	20	30	40	50	60
hPEX	70	80	90	100	110	120
	AAAAILSKVNLSVDPDGNFFRFACDGGWISNNPIPEDMPSYGVYPWLRHNVDLKLKELLEK					
	::..	::..	::..	::..	::..	::..
hNEP	SAARLIQNMDATTEPCTDFFKYACGGWLKRNVIPETSSRYGNFDILRDELEVVLKDLVQE					
	70	80	90	100	110	120
hPEX	130	140	150	160	170	180
	SISRRRDTEAIOKAKILYSSCMNEKAIEKADAKPLLHILRHSPFRWPVLESNIGPEGVWS					
	...	:.....	:.....	:.....	:.....	:.....
hNEP	PKT--EDIVAVQKAKALYRSCINESAIDSRGGEPLLLKLPDI-YGWPVATENWEQKYGAS					
	130	140	150	160	170	180
hPEX	190	200	210	220	230	240
	ERKFSLLOTLATFRGQYSNSVFIRLYVSPDDKASNEHILKLDQATLSLAVREDYLDNSTE					
	. ....	:.....	:.....	:.....	:.....	:.....
hNEP	W---TAEKAIQALNSKYGKKVLINLFVGTDDKNSVNHVIHIDQPRGLPSRDYECTGIY					
	190	200	210	220	230	240

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ (cont.)

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TABLE 99-011 90860

hPEX	250	260	270	280	290
	AKSYRDALY-KFMVDTAVLLGANSRAEH---DMKSVLRLEIKIAEIMIPHENRT-SEA				
hNEP	240	250	260	270	280
	KEACTAYVDFMISVARLIRQEEERLPIDENQALALEMKNVMELEKEIANATAKPEDRNDPML				
hPEX	300	310	320	330	340
	MYNKMNISEL-SAMIPQFDWLGYIK-KVIDTRLYPHLKDISPSENVVVRVPQYFKDLFRI				
hNEP	300	310	320	330	340
	LYNKMTLAQIQNNFSLEINGKPFWSLNFTEIMSTVNISITNEEDVVVYAPEYLTCLKPI				
hPEX	360	370	380	390	400
	LGSERKKTIANYLWVRMVYSRIPNLSRRFQYRWLEFSRVIQGTTLTPQWDKCVNFIESA				
hNEP	360	370	380	390	400
	LTKYSARDLQNLMSWRFIMDLVSSLSRITYKESRNAFRKALYGTTSATWRRRCANYVNGN				

TABLE 99-011 (cont.)

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101100-01100000

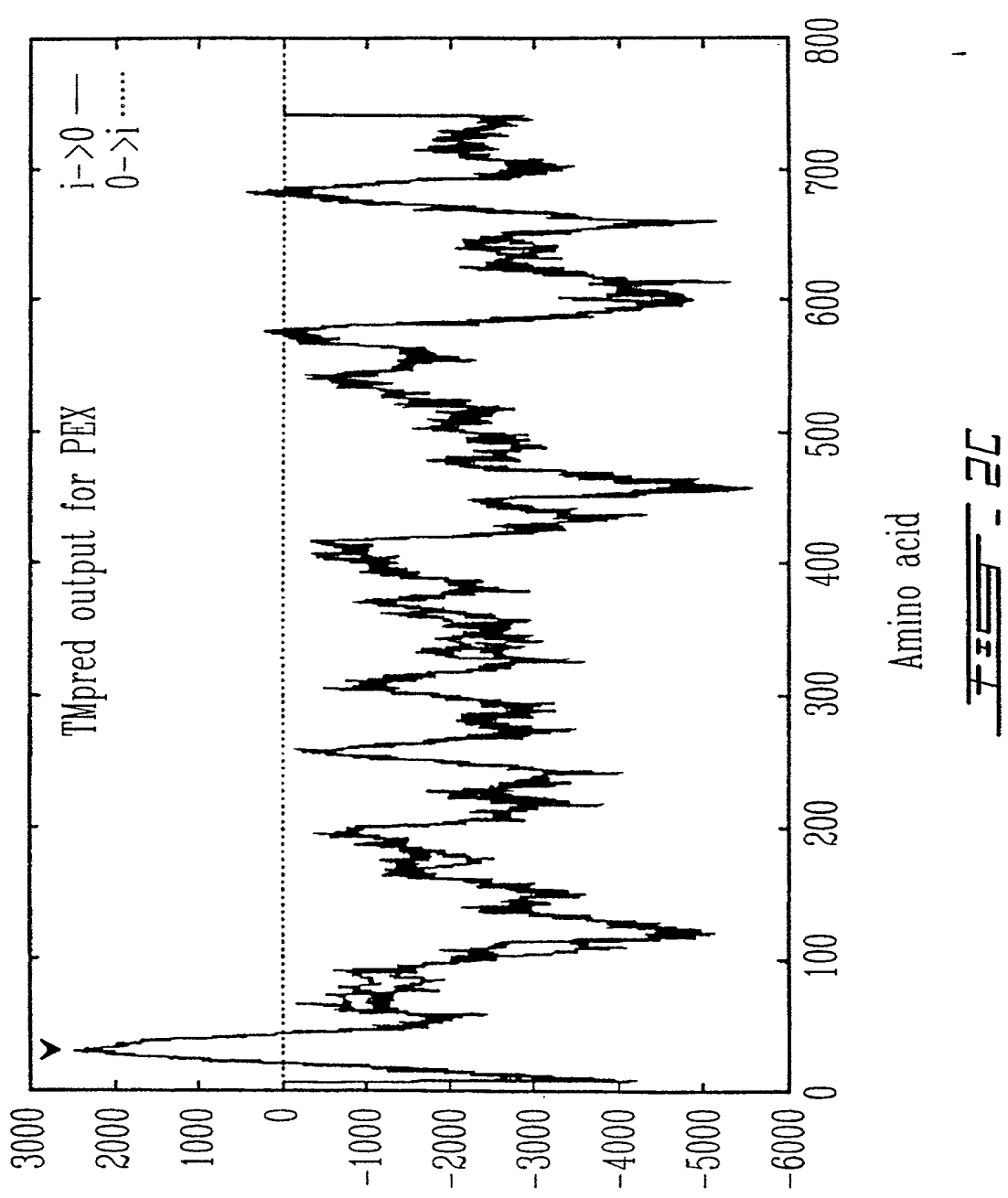
hPEX	420	430	440	450	460	470
	LPYVVGKMFVDVYFQEDKKEMMEELVEGVWAFIDMLEKENWMDAGTKRKAKEKARAVL					
hNEP	420	430	440	450	460	470
	MENAVGRLYVEAAFAFAGESKHVVEDLIAQIREVFIQTLD-DLTWMDAETKKRAEEKALAIK					
hPEX	480	490	500	510	520	530
	AKVGYPEFIM-NDTHVNEDLKAIFSEADYFGNVLQTRKYLAQSDFFWLKAVPKTEWFT					
hNEP	480	490	500	510	520	530
	ERIGYPDDIVSNDNKLNNNEYLELNYKEDYFENIIQNLKFSQSKQLKKLREKVDKDEWIS					
hPEX	540	550	560	570	580	590
	NPTTVNAFYSASTNQIRFPAGELQKPPFFWGTEYPRSLSYGAIGVIVGHEFTHGFDNNGRK					
hNEP	540	550	560	570	580	590
	GAAVVNAFYSSGRNQIVFPAGILQPPFFSAQQSN-SLNYGGIGMVGHEITHGFDNNGRN					

7111-28 (cont.)

	1970	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983	1984	1985	1986	1987	1988	1989	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	2026	2027	2028	2029	2030	2031	2032	2033	2034	2035	2036	2037	2038	2039	2040	2041	2042	2043	2044	2045	2046	2047	2048	2049	2050	2051	2052	2053	2054	2055	2056	2057	2058	2059	2060	2061	2062	2063	2064	2065	2066	2067	2068	2069	2070	2071	2072	2073	2074	2075	2076	2077	2078	2079	2080	2081	2082	2083	2084	2085	2086	2087	2088	2089	2090	2091	2092	2093	2094	2095	2096	2097	2098	2099	2100	2101	2102	2103	2104	2105	2106	2107	2108	2109	2110	2111	2112	2113	2114	2115	2116	2117	2118	2119	2120	2121	2122	2123	2124	2125	2126	2127	2128	2129	2130	2131	2132	2133	2134	2135	2136	2137	2138	2139	2140	2141	2142	2143	2144	2145	2146	2147	2148	2149	2150	2151	2152	2153	2154	2155	2156	2157	2158	2159	2160	2161	2162	2163	2164	2165	2166	2167	2168	2169	2170	2171	2172	2173	2174	2175	2176	2177	2178	2179	2180	2181	2182	2183	2184	2185	2186	2187	2188	2189	2190	2191	2192	2193	2194	2195	2196	2197	2198	2199	2200	2201	2202	2203	2204	2205	2206	2207	2208	2209	2210	2211	2212	2213	2214	2215	2216	2217	2218	2219	2220	2221	2222	2223	2224	2225	2226	2227	2228	2229	2230	2231	2232	2233	2234	2235	2236	2237	2238	2239	2240	2241	2242	2243	2244	2245	2246	2247	2248	2249	2250	2251	2252	2253	2254	2255	2256	2257	2258	2259	2260	2261	2262	2263	2264	2265	2266	2267	2268	2269	2270	2271	2272	2273	2274	2275	2276	2277	2278	2279	2280	2281	2282	2283	2284	2285	2286	2287	2288	2289	2290	2291	2292	2293	2294	2295	2296	2297	2298	2299	2300	2301	2302	2303	2304	2305	2306	2307	2308	2309	2310	2311	2312	2313	2314	2315	2316	2317	2318	2319	2320	2321	2322	2323	2324	2325	2326	2327	2328	2329	2330	2331	2332	2333	2334	2335	2336	2337	2338	2339	2340	2341	2342	2343	2344	2345	2346	2347	2348	2349	2350	2351	2352	2353	2354	2355	2356	2357	2358	2359	2360	2361	2362	2363	2364	2365	2366	2367	2368	2369	2370	2371	2372	2373	2374	2375	2376	2377	2378	2379	2380	2381	2382	2383	2384	2385	2386	2387	2388	2389	2390	2391	2392	2393	2394	2395	2396	2397	2398	2399	2400	2401	2402	2403	2404	2405	2406	2407	2408	2409	2410	2411	2412	2413	2414	2415	2416	2417	2418	2419	2420	2421	2422	2
--	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	------	---

FILE - 28 (cont.)

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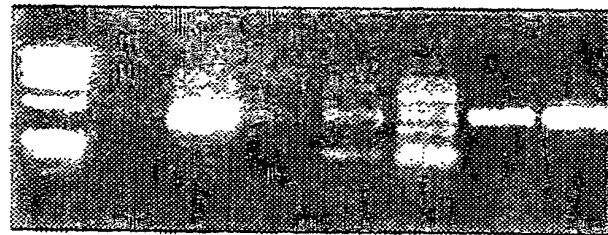
Saos-2  
Tumor 1



FIG. 4

Marker  
Control  
Tumor 1  
Adult kidney  
Fetal muscle  
Fetal kidney  
Fetal calvaria  
Saos-2

PEX



Relative Expression

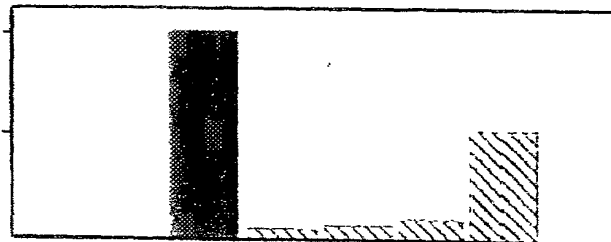
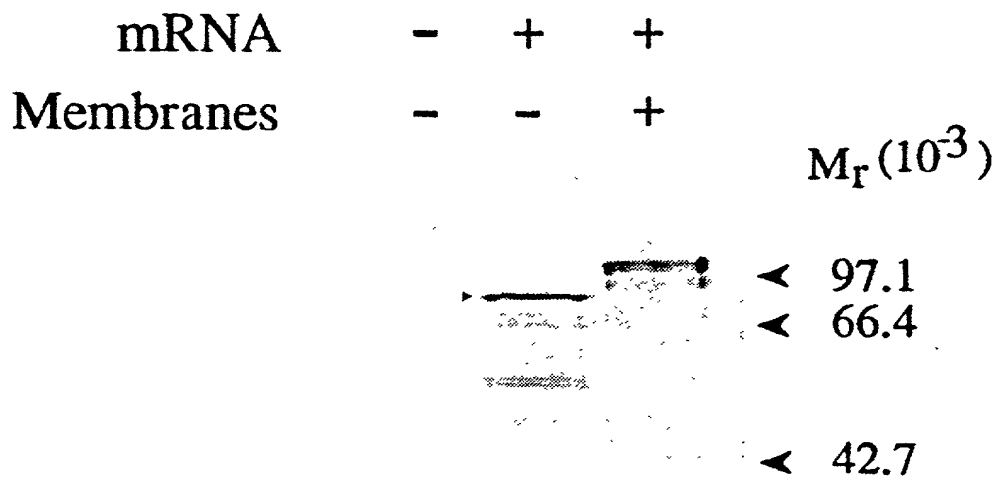


FIG. 5



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FIS-5

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A

TX114

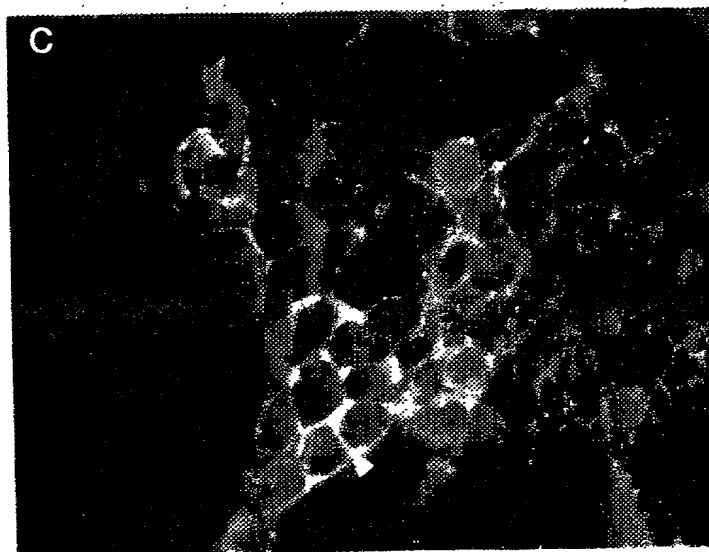
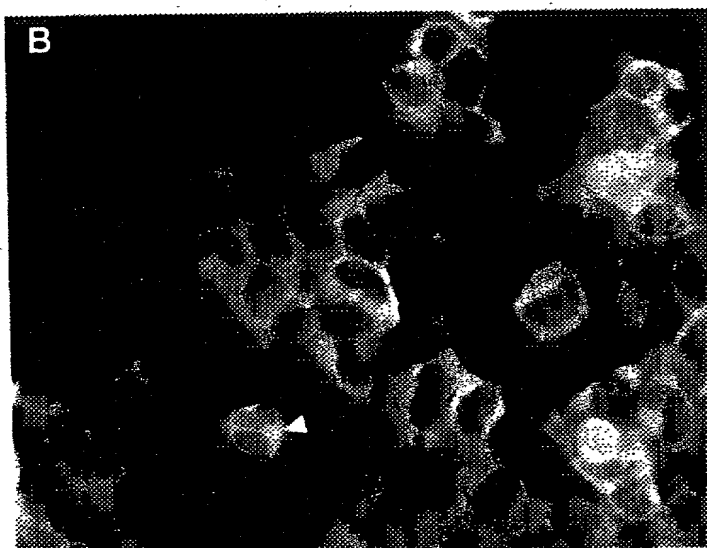
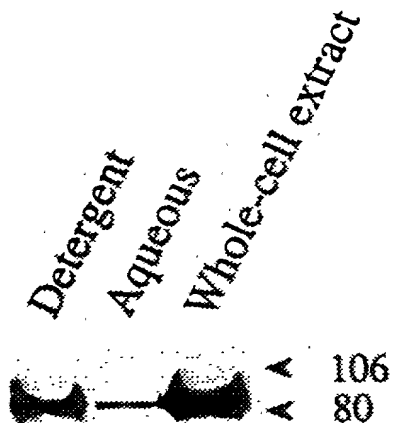
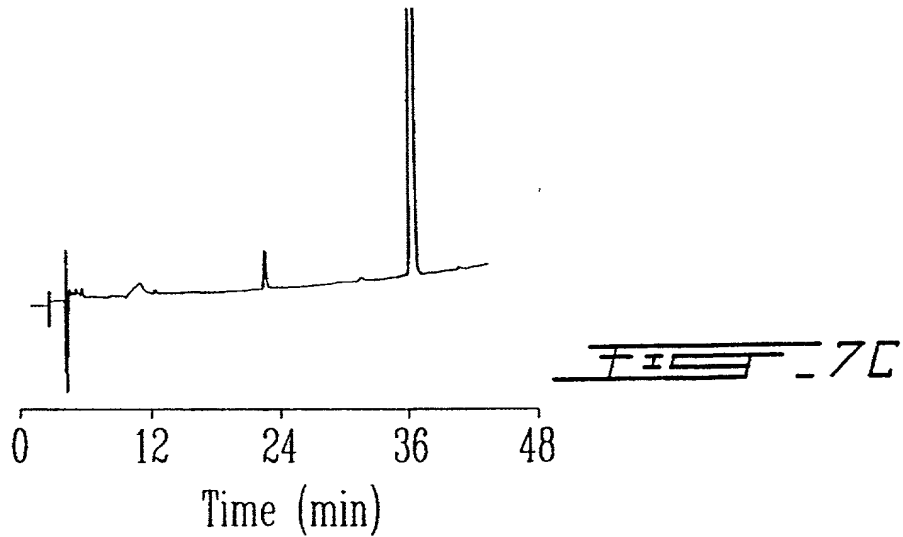
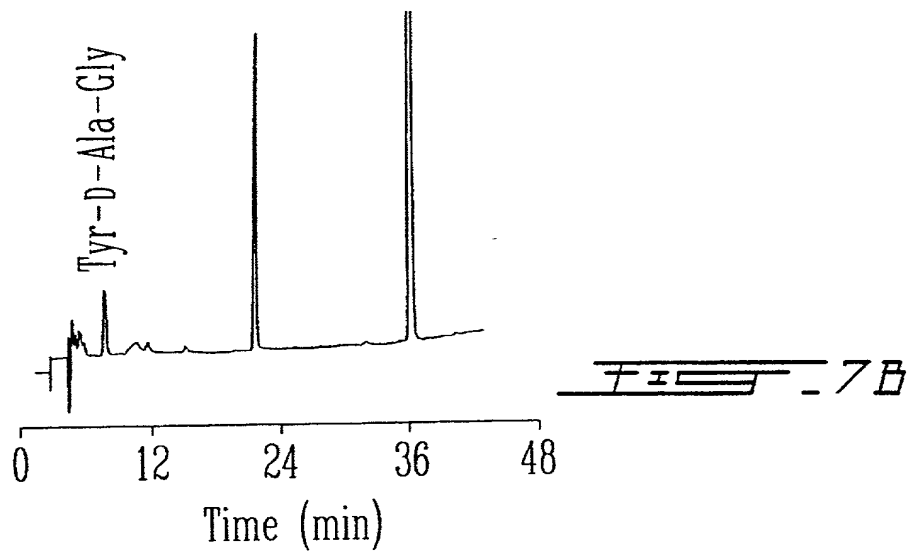
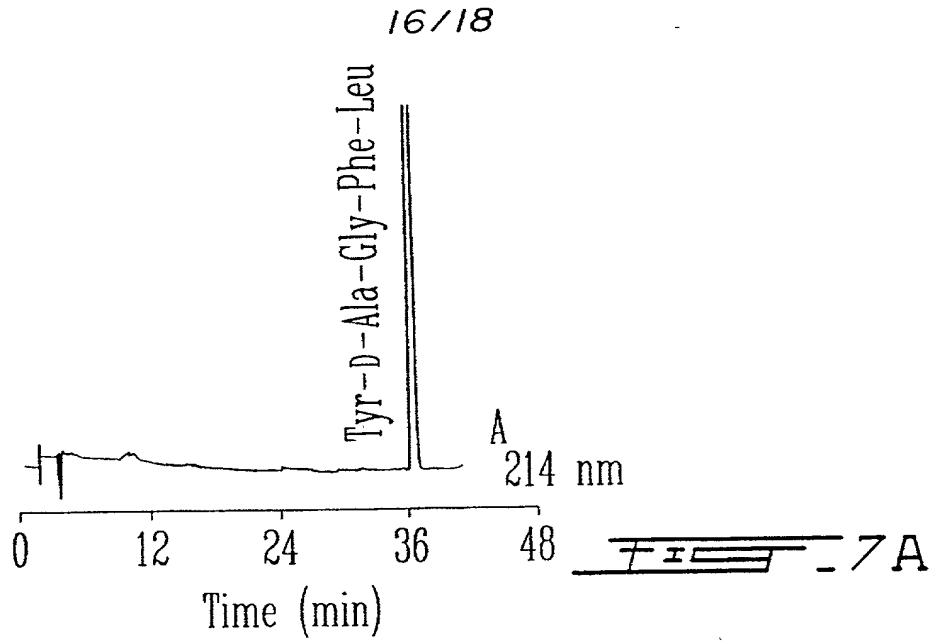
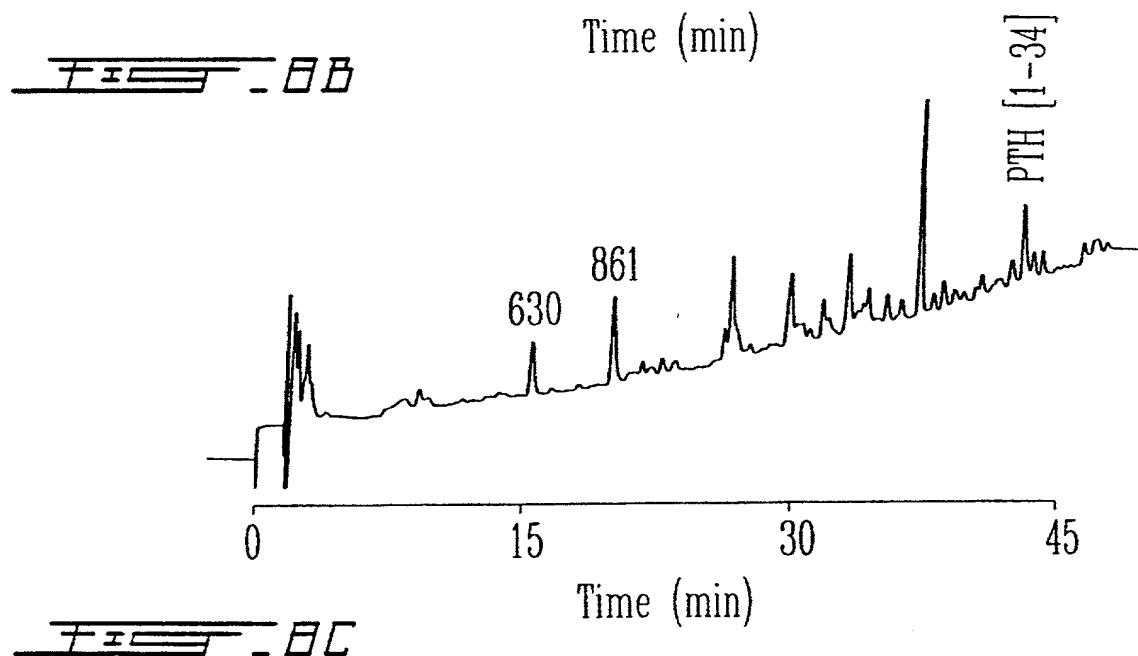
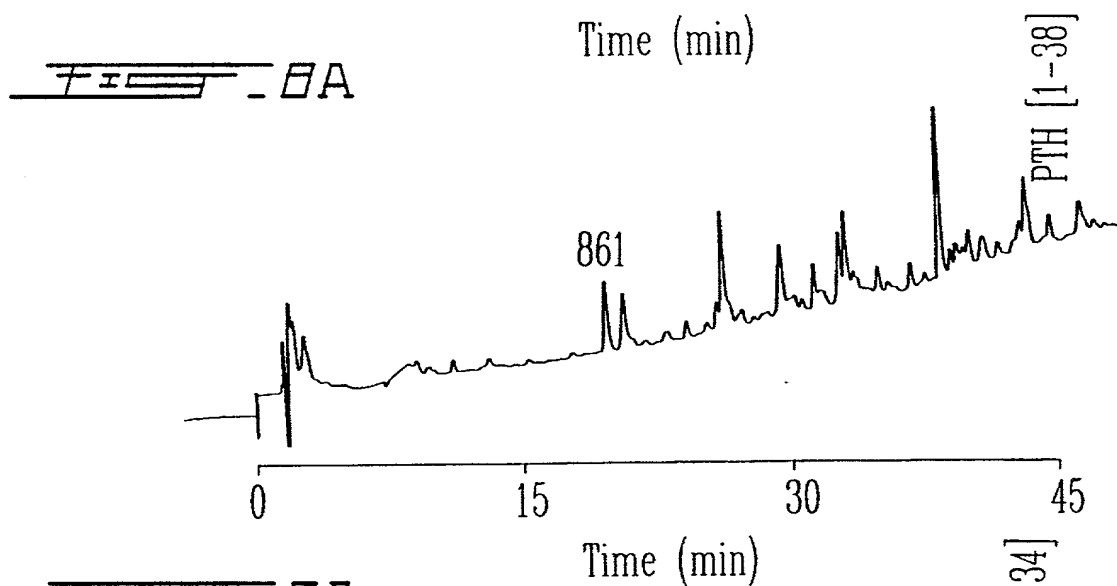
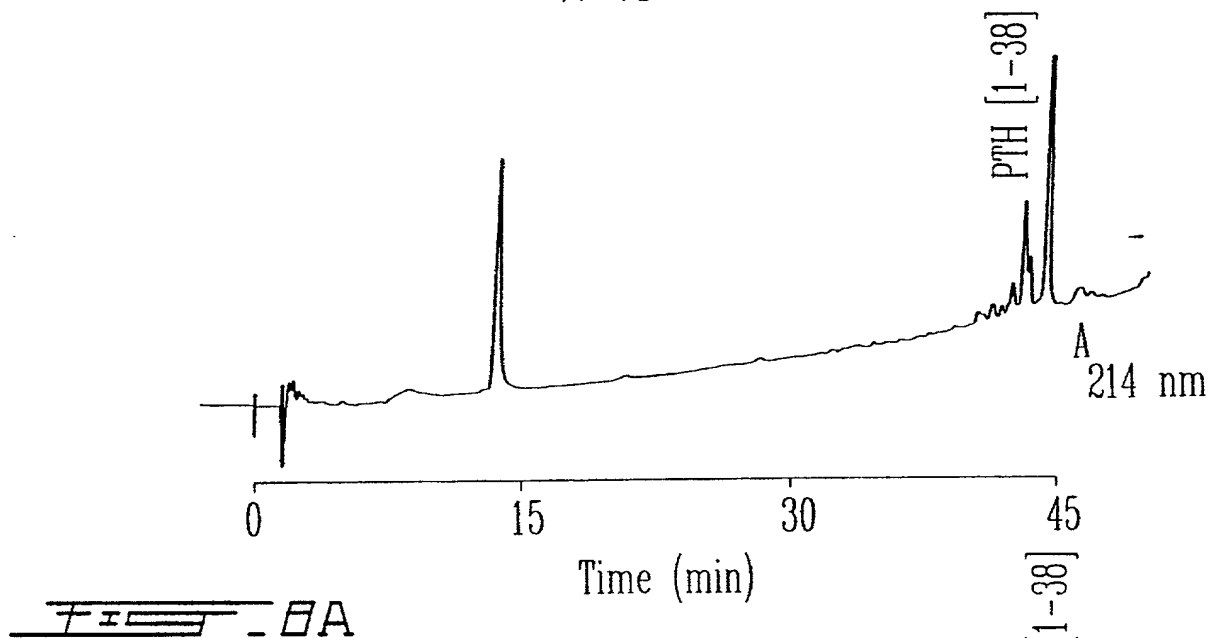


FIG. 6

09806110-003401



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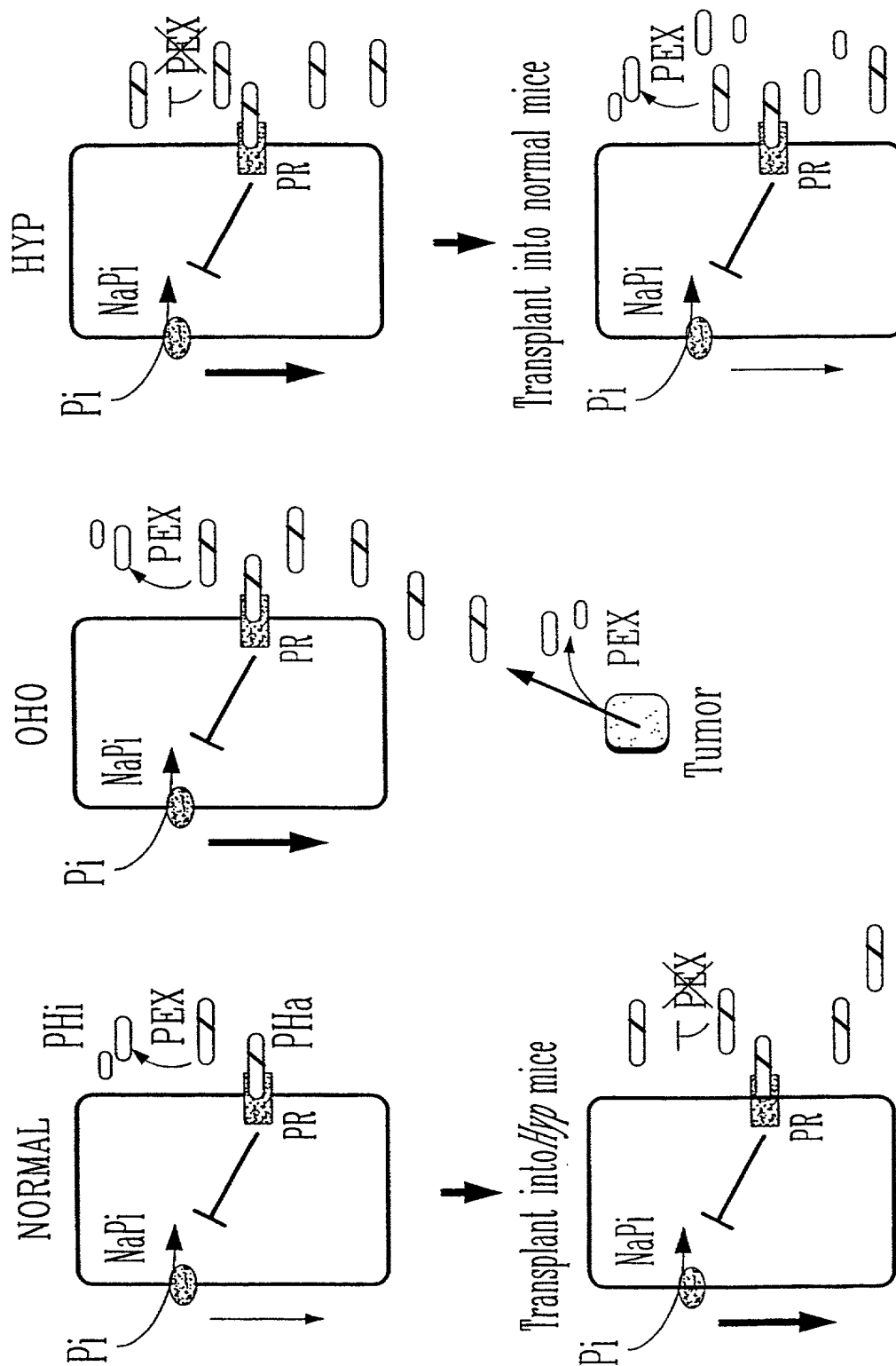


FIG. 9.

**DECLARATION AND POWER OF ATTORNEY**  
**(Attorney Docket No. 109.647.121)**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship is as stated below next to my name.

I believe that I am an original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which (check only one):

☐ is attached hereto.

☒ was filed as United States Patent Application

Serial No. 09/806,110

on \_\_\_\_\_

and was amended

on \_\_\_\_\_

(if applicable)

☐ was filed as PCT Patent Application

Serial No. \_\_\_\_\_

on \_\_\_\_\_

and was amended under PCT Article 19

on \_\_\_\_\_

(if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of the claims of this application in accordance with Title 37, Code of Federal Regulations, Sections 1.56(a) and 1.56(b).

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

BOSTON 1226436v1

**PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS  
UNDER 35 U.S.C. §119(a)-(d) or 365(b):**

COUNTRY (if PCT indicate PCT)	APPLICATION NUMBER	DATE OF FILING	PRIORITY CLAIMED UNDER 35 U.S.C. §119(a)- (b) or 365(b) (YES/NO)
PCT	CA99/00895	September 27, 1999	Yes
Canada	2,245,903	September 28, 1998	Yes

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional patent application(s) listed below:

APPLICATION NUMBER	DATE OF FILING	STATUS: (PENDING OR ABANDONED)
--------------------	----------------	-----------------------------------

I hereby claim the benefit under Title 35, United States Code, § 120 or 365(c) of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56 which occurred between the filing date of the prior applications and the national or PCT international filing date of this application:

**PRIOR U.S. APPLICATION OR PCT INTERNATIONAL APPLICATION(S)  
DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. § 120 or 365(c):**

APPLICATION NUMBER	DATE OF FILING (day, month, year)	STATUS: (PATENTED, PENDING OR ABANDONED)
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**POWER OF ATTORNEY:** As named inventors, we hereby appoint the following attorneys and/or agents to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

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Steven D. Barrett	<u>40,903</u>	James B. Lampert	<u>24,564</u>
Michael J. Bevilacqua	<u>31,091</u>	Keum J. Park	<u>42,059</u>
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Peter M. Dichiaro	<u>38,005</u>	Donald R. Steinberg	<u>37,241</u>
Richard A. Goldenberg	<u>38,895</u>	Colleen Superko	<u>39,850</u>
Edward D. Grieff	<u>38,898</u>	C. Hall Swaim	<u>22,838</u>
Sally Byrne	<u>40,545</u>	Rajesh Vallabh	<u>35,761</u>
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David J. Cerveney	<u>44,600</u>	Ayla A. Lari	<u>43,739</u>
Nels Lippert	<u>25,888</u>	Dominic Massa	<u>44,905</u>
Gregory S. Discher	<u>42,488</u>	Irah H. Donner	<u>35,120</u>

- 2 -

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David Cerveney	44,600	David Cavanaugh	36,476
Irah H. Donner	35,120	Gregory S. Discher	42,488
Anthony Kahng	42,704	Maria Maebius	42,967
Cynthia Nicholson	36,880	Tamara Pertmer	47,856
MaryRose Scozzafava	36,268	Victor Souto	33,458
Leonid Thenor	39,397	Michael J. Twomey	38,349
Gary A. Walpert	26,098	Lisa Wilson	34,045
Joseph Haag	42,612	Wendy A. Haller	35,177

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Wherefore I petition that letters patent be granted to me for the invention or discovery described and claimed in the attached specification and claims, and hereby subscribe my name to said specification and claims and to the foregoing declaration, power of attorney, and this petition.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements

were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first and joint inventor Andrew C. Karaplis

Inventor's signature [Signature]

Date 20/8/01

Country of Citizenship: Canada

Residence: Kirkland, Québec CAN

Post Office Address: 95 Meaney, Kirkland, Québec H9I 3V6, Canada

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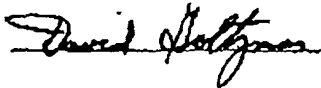
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2 - 00

**Full name of additional joint inventor:** David Goltzman

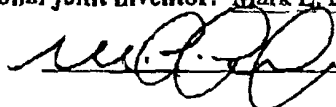
Inventor's signature

Date August 30, 2001Country of Citizenship: CanadaResidence: Westmount, Québec CAXPost Office Address: 667 Belmont, Westmount, Québec H3Y 2W3, Canada

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**Full name of additional joint inventor:** Mark L. Lipman

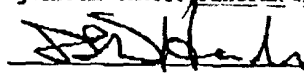
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Date Aug 29, 2001Country of Citizenship: CanadaResidence: Town of Mount Royal, Québec CAXPost Office Address: 2258 Fulton Road, Town of Mount Royal, Québec H3R 2L4, Canada

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**Full name of additional joint inventor:** Janet E. Henderson

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- 4 -

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1/12

JC08 Rec'd PCT/PTO 28 MAR 2001

## SEQUENCE LISTING

<110> MCGILL UNIVERSITY  
 KARAPLIS, Andrew C.  
 GOLTZMAN, David  
 LIPMAN, Mark L.  
 HENDERSON, Janet E.

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Phe	Arg	Phe	Ala	Cys	Asp	Gly	Trp	Ile	Ser	Asn	Asn	Pro	Ile	Pro	Glu
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Glu	Ala	Lys	Ser	Tyr	Arg	Asp	Ala	Leu	Tyr	Lys	Phe	Met	Val	Asp	Thr
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&lt;211&gt; 747

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Phe	Lys	Tyr	Ala	Cys	Gly	Gly	Trp	Leu	Lys	Arg	Asn	Val	Ile	Pro	Glu
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Thr	Ser	Ser	Arg	Tyr	Gly	Asn	Phe	Asp	Ile	Leu	Arg	Asp	Glu	Leu	Glu
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Ile	Gln	Asn	Asn	Phe	Ser	Leu	Glu	Ile	Asn	Gly	Lys	Pro	Phe	Ser	Trp
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Pro	Gly	Leu	Asp	Leu	Asn	His	Lys	Gln	Leu	Phe	Phe	Leu	Asn	Phe	Ala				
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Lys	Thr	Asp	Val	His	Ser	Pro	Gly	Asn	Phe	Arg	Ile	Ile	Gly	Thr	Leu				
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